

BOARD OF SUPERVISORS

Brown County



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HUMAN SERVICES COMMITTEE

Erik Hoyer, Chair
Richard Schadewald, Vice Chair
Joan Brusky, Thomas De Wane, Aaron Linsen

HUMAN SERVICES COMMITTEE

Thursday, July 21, 2016

5:30 p.m.

**Room 200, Northern Building
305 E. Walnut Street, Green Bay**

**NOTICE IS HEREBY GIVEN THAT THE COMMITTEE MAY TAKE ACTION ON ANY ITEM
LISTED ON THE AGENDA**

****REVISED****

- I. Call Meeting to Order.
- II. Approve/Modify Agenda.
- III. Approve/Modify Minutes of June 29, 2016.

Comments from the Public

Report from Human Services Chair, Erik Hoyer

1. **Review Minutes of:**
 - a. Board of Health (May 10, 2016).
 - b. Human Services Board (July 14, 2016).
 - c. Veterans' Recognition Subcommittee (June 21, 2016).

Reports

2. Teen Parent Program Quarterly Outcome Report, Catholic Charities – Informational.
3. Department Vacancies Report as of June 27, 2016.
- 3a. Proclamation Declaring August 20 as Operation Desert Shield/Desert Storm Veterans Day in Brown County – Request for Approval.

Treatment Court

4. Update on Treatment Court by Judge Zuidmulder.

Wind Turbine Update

5. Update for Environmental Division on complaint process.
6. Report by Health Director.
 - i. Cost of peer review.
 - ii. Questions for Attorney General.
 - iii. Supervisor discussion.

Health Department

7. Budget Adjustment Request (16-39): Any increase expenses with an offsetting increase in revenue.

8. Budget Adjustment Request (16-40): Any increase expenses with an offsetting increase in revenue.
9. Budget Adjustment Request (16-41): Any increase expenses with an offsetting increase in revenue.
10. Budget Adjustment Request (16-62): Any increase expenses with an offsetting increase in revenue.

Human Services Department

11. Examine scheduling issues at Community Treatment Center – *standing item per motion at April, 2016 meeting.*
- 11a. Budget Adjustment Request (16-65): Reallocation between two or more departments regardless of amount.
12. Executive Director's Report.
13. Financial Report for Community Treatment Center and Community Programs (to be provided prior to meeting).
14. Statistical Reports.
 - a. CTC Staff – Double Shifts Worked (to be provided prior to meeting).
 - b. Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Hospital.
 - c. Monthly Inpatient Data – Bellin Psychiatric Center.
 - d. Child Protection – Child Abuse/Neglect Report.
 - e. Monthly Contract Update.
15. Request for New Non-Continuous Vendor.
16. Request for New Vendor Contract.

Aging & Disability Resource Center - No agenda items.

Syble Hopp – No agenda items.

Veterans Services – No agenda items.

Other

17. Audit of bills.
18. Such other Matters as Authorized by Law.
19. Adjourn.

Erik Hoyer, Chair

Notice is hereby given that action by Committee may be taken on any of the items which are described or listed in this agenda. Please take notice that it is possible additional members of the Board of Supervisors may attend this meeting, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

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ADDITION TO HUMAN SERVICES COMMITTEE

Thursday, July 21, 2016 @ 5:30 p.m., Room 200, Northern Building, 305 E. Walnut Street, Green Bay, Wisconsin.

Human Services Department

#11a. Budget Adjustment Request (16-65): Reallocation between two or more departments, regardless of amount.

News media notified by fax 07/18/2016.

Human Services Committee Members and County Board notified by email on 07/18/2016 and placing on desks 07/21/2016.

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular meeting of the **Brown County Human Services Committee** was held on Wednesday, June 29, 2016 in Room 200 of the Northern Building, 305 E. Walnut Street, Green Bay, Wisconsin.

Present: Chair Hoyer, Supervisor Schadewald, Supervisor Brusky, Supervisor Linssen, Supervisor De Wane

Also Present: Supervisors Evans, Zima, Van Dyck, Health Department Environmental/Lab Manager Rob Gollman, Human Services Director Erik Pritzl, Finance Manager Eric Johnson, Nursing Home Administrator Luke Schubert, other interested parties and news media

Audio of this meeting is available by contacting the County Board Office at (920) 448-4015

I. Call Meeting to Order.

The meeting was called to order by Chair Hoyer at 5:30 p.m.

II. Approve/Modify Agenda.

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of May 25, 2016.

Supervisor Brusky noted the second to last line on the bottom of Page 5 did not make sense. A brief explanation was made of the language.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald as modified. Vote taken. MOTION CARRIED UNANIMOUSLY

Comments from the Public:

Mary Kelly - 1430 Skylark Lane, Green Bay, WI

Kelly was here to speak on behalf of the mental health treatment committee of JOSHUA. The group is here tonight following through with their interest in the progression of the mental health initiatives that the County Board approved 6 months ago. Kelly wished to thank the Board for supporting the initiatives and indicated that JOSHUA looks forward to the County providing greatly needed help for those suffering from significant mental illness. She continued that recent talks at their subcommittee brought to their attention the initiatives and progression they are seeing or may not be seeing as the County continues to implement the changes. JOSHUA is aware of the vast undertaking these initiatives involve and they are hopeful that possible delays do not result in reduction of the funds that have been budgeted for these programs to date. Long term plans are essential for these programs and the goal is to make sure that treatment is not denied or delayed for those in crises or in need of help, nor for those with significant substance abuse needs. She thanked the Committee for allowing JOSHUA to make their voice known and for all of the great work being done in Brown County.

Benjamin Schauer - 6225 Highview Road, Denmark, WI

Schauer was here to ask the Board to consider dismissing former Health Director Chua Xiong's findings with regard to the wind turbines. He felt the findings were irrationally and irresponsibly made and said she did not take into account all of the evidence, such as his family, who lives right in the middle of the wind farm. Schauer continued that Xiong did not want to come out and speak with himself, his wife or his children. His wife and 2 sons have been suffering greatly at the hands of the wind turbines. Schauer noted that his wife sleeps in the basement and his sons have issues with sleeping and headaches and so forth and he asked the Board to seriously take that into consideration.

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Joan Lagerman – Fond du Lac County Blue Sky Green Field Wind Farm

Lagerman informed that she has lived in Fond du Lac County with the Blue Sky Green Field Farm surrounding her, one turbine being less than 1000 feet from her bedroom window. She said on nights when the turbines are really going she lays there staring at the ceiling clenching her jaw because there is no way to turn it off and no one to call. Lagerman continued that this has affected families in her area greatly and she knows of people who are sleeping in their basements because of this. She noted she was in Las Vegas five years ago and stayed near an airport runway and even with that noise she slept much better than she does at home because she was away from the turbines. The turbines make you feel like you are always under assault. Lagerman continued that Xiong looked at her dead in the eye and said that she believed Lagerman's symptoms and that she was not alone. Lagerman did not have any idea how Xiong came to the conclusion she did. She noted that nobody has ever come to her home to ask any questions or do any testing. It is hard to find something when you refuse to look for it, and Lagerman said that that is what Chua Xiong did; she refused to look for the truth.

Jim Crawford – 5670 Ronk Road, New Denmark, WI

Crawford wanted to address the mental health progress reports as they will describe how the County is implementing the new mental health initiatives. He noted that Human Services Director Erik Pritzl has worked hard to implement the initiatives and he asked the Committee to support Pritzl in his efforts. Crawford's particular areas of concern are ensuring that the Crisis Center has enough trained counselors to provide mobile crisis services and that the Crisis Center is operating efficiently; making sure that Bellin and the County implement the new detox center in July as planned; and making sure that a contract is awarded for the Day Report Center and the Center is ready in July.

Crawford also wished to address the communications with regard to the wind turbines. He noted he is speaking as an individual and not as a member of the Board of Health. He felt that Jim Vanden Boogart's criticism of former Health Director Chua Xiong is totally unwarranted and felt that Xiong made a wise decision in judging that the 8 turbines at Shirley Wind are not a health hazard. Crawford continued that the Brown County Citizens for Responsible Wind Energy support claims that adverse health effects from wind turbines are due to the harmony of their infrasound emissions. The medical community does not support the infrasound theory, nor does Brown County and Crawford said there are very few around the world that do support the theory. He referenced a review by an impressive group of the medical community that is contained in the March minutes of the Board of Health. This review suggests wind turbine-related symptoms are due to long term stress induced by individuals annoyed by the look, motion or sound of the turbines and can be treated by a course of therapy. The review also concludes that exposure to infrasound is not harmful.

Crawford continued that infrasound comes from many sources, not just wind turbines. He said there are two theories of cause and effect. He noted that Chapter 38 of the Brown County Code defines a health hazard as a condition that is known to have the potential to cause chronic illness, like E-coli in polluted water. The theories about wind turbines are not known, and some are not even logical and for those reasons he felt Xiong's decision was correct and wind turbines should not be labeled a health hazard. Crawford suggested the Committee make a motion that "the decision by Director Chua Xiong shall remain in effect for at least 2 years after a permanent new director is hired, unless preempted by state or federal law."

Crawford also believes that only a few of his neighbors are affected by the 8 turbines of Shirley Wind. Most do not want more, but can live with the 8 that are already in place. If wind turbine complaints need more attention by the Health Department Crawford felt the Board needs to give that department more funding so an investigator can go out and verify each complaint. Otherwise, complaints trend to the frivolous and slanted.

Jim Vanden Boogart – 7463 Holly-Mor Road, Morrison

Vanden Boogart addressed the Committee and said his comments do not deal with something on the agenda, but they do deal with requests that have been made by this Committee and the Board of Health and that is that statements from medical professionals be provided setting forth their beliefs that wind turbines sited in proximity to human populations do cause harm. Vanden Boogart put together some documentation that he provided to the Committee. Vanden Boogart explained that the information he had with him tonight consists of a list of 84 professionals who have publicly expressed their concerns regarding wind turbines and human health. Over 50 of the individuals on the list are medical professionals. Vanden Boogart also presented about 50 pages of statements from some of the medical professionals. He also directed the Committee's attention to the report of Dr. Phillips and said that this presentation

should be read as it references methodology that Xiong did not follow. *This information submitted is available for view in the County Board Office.*

Report from Human Services Chair, Erik Hoyer

Chair Hoyer reported that one of the tasks of the Chair of this Committee is to assign someone to the Criminal Justice Coordinating Board and he noted that he has asked Supervisor Brusky to do this. Brusky has accepted this and is enthusiastic and will keep the Human Services Committee updated as to what is going on at the Criminal Justice Coordinating Board.

Hoyer also reported that the videos that are recorded during meetings may be going online and asked the Committee to take some time to consider whether they want to choose to have the meetings posted online. This will be discussed further at the next meeting.

1. Review Minutes of:

a. Human Services Board (June 9, 2016).

Brusky noted that Item 6 referenced in these minutes was not included in the materials she received.

Motion made by Supervisor Schadewald, seconded by Supervisor De Wane to receive and place on file with the exception of Item 6 which is missing. Vote taken. MOTION CARRIED UNANIMOUSLY

b. Veterans' Recognition Subcommittee (May 17, 2016).

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Communications

2. Communication from Supervisor Zima (for Steve Deslauriers) re: I am requesting the Human Services Committee review why wind turbine complaints are not handled by the Health Dept. as other health complaints. *Motion at May meeting: To hold item until the next meeting.*

Zima noted that Items 2 and 3 are related. He said one of his main goals of bringing these communications is that the standing committee be responsive to the public and that when the public starts collecting data and is willing to help with the investigation, the standing committee should be responsible. He noted that windmills have been around for centuries but not to the extent that they are today and what they might be in the future. Zima said a lot of the information that is going to come forth needs to be reviewed and the constant re-reviewed. He said it was hard to follow the logic that symptoms from wind turbines are just a matter of stress. Zima said if you follow that logic, Chinese water torture could be defined as a stress-related problem that could be cured by mental health services. He does not follow this logic and felt there was enough information in the world that anybody that would deny that windmills could cause a negative effect on people would need mental health services. Zima said that people are beginning to understand that these problems are not being imagined. He said the government wants other forms of energy and there has to be ways to accommodate that. He wants the wind turbine issues honestly investigated and noted that he does not want to throw Xiong under the bus and it is his sense that she was under tremendous political stress with this issue. Zima thinks there should be a committee to do an honest investigation and gather as much information as possible and then try to decide how to handle this. He said there have been complaints about how this is handled by the Health Department and feels it is important to gather the tools necessary to gather data. He wants to be part of the solution and not turn his back on those who live near the windmills. Zima does not think that just because there is nothing verified is a good enough reason to dismiss things. His hope is that a line can be drawn in the sand that the County Board is willing to listen and examine whatever has been brought forward and look at it and ask people to continue to look at it and give the people the voice they need to be heard.

Zima feels the Board has a duty to examine problems and find solutions to problems that exist. He will not agree with anyone who says this is a form of mental illness. With that said, he would like the Committee to give all of the due diligence necessary to examine this and be the filter for the County Board. He understands that this will take time and

feels that today is a starting point. He noted that there are a lot of intelligent people who put time and effort into this and he urged the Committee to listen to them and then set up some sort of basis to examine this and give these people the best quality of life they can have.

Supervisor Schadewald would like to deal with Item 2 first and noted that as a Board of Health member, he wants to be sure that things are done properly. He was glad to hear that Zima supports the idea of a task force to educate the County Board on this issue. Schadewald said the Board of Health gets a lot of information on this and he would like to see that information transfer to the Human Services Committee so that this Committee can educate the other County Board members. In addition, Schadewald noted that the Board of Health is hopeful that Rick James will have an ordinance written by the end of the year and noted that the County Board budgeted funds for this several years ago. An ordinance would be the tool of enforcement. Schadewald also felt that we need to look at what the State put in their rules about flicker and 50 MHz. Schadewald agrees with Zima regarding equipment and said that for what Duke Energies pays, that amount of money could be used to buy a truck with equipment to measure 50 MHz and take pictures of the flicker. He wants the Committee to be aware that the Board of Health is working on this.

Zima does not want to discredit the Board of Health in any way, but said they have been working on this for a number of years and sometimes it seems like they are spinning their wheels. He said the Human Services Committee should be involved in the nitty gritty to get better results. Zima again suggested a task force and noted that this is very important. He said there are other places where people are struggling with this and he is not willing to just sign this off. He continued that the Committee is part of the gatherers of information and said the rest of the world is looking at what is being done here and urged the Committee to keep their minds wide open and exam and consider what is put before them and do what is right.

Steve Deslauriers – 289 Wayside Road, Greenleaf, WI

Deslauriers said this is his communication that Zima brought forward. He brought this up at another Human Services meeting as well as at County Board meetings. His goal is very simple but incredibly critical for the Health Department. He wants to know why health complaints from families around Shirley Wind, some of whom welcomed the project, have not been handled by the Health Department in a professional manner like complaints on other topics are handled. Deslauriers said that he has been advised by the Health Department that they do not have the authority to regulate infrasound. He feels that his is putting the cart before the horse because the Health Department has never declared that this is an infrasound issue that is causing the problems with these families. The only action he is aware the Health Department has done is accept complaints with minimal logging, go out and take some audible sound readings and say whether they are in compliance or not and say they are sorry. Deslauriers said if the Health Department is going to hang their hat on the basis that they do not have the authority by statute or regulation to deal with infrasound issues, than they have to declare this is an infrasound issue. His concern is the Health Department has never gone through the hard work process of declaring it is infrasound and then saying they do not have regulatory authority. They just basically said they do not have the tools or authority. Deslauriers continued that Mr. Crawford saying the people are simply annoyed minimizes the task at hand for the Health Department and noted that Crawford does not live anywhere near the turbines and does not have any stake in it.

Zima feels Deslauriers' comments seem to be in order and added that there may be things that are currently not in the state law which maybe should be. He continued that this is a beginning of a long walk and it needs to start here. He said when people are abandoning expensive homes you cannot say this is imaginary. Zima thinks there is a way to go out and collect data efficiently that can be brought to the Committee. Deslauriers said that the truth would be evident at that point, but without fact gathering about symptoms, proximity to turbines, what meteorological conditions were happening, etc., the truth cannot be seen. If data is collected and actively looked at, the truth would become evident very quickly. He would like to see the Health Department treat the wind complaints similar to the complaints they receive about Sanimax. Currently the Health Department does not do this with Shirley Wind, and he noted that people are not abandoning homes around Sanimax, but they are around Duke. Duke has paid over \$100,000 to the County and that is money that could be used to help these people get some relief, but nothing has been done.

Supervisor De Wane also believes the Health Department needs to be involved. He would like the Health Department to come back to the next meeting and advise the Committee what equipment they would need to gather the information that is needed. De Wane said there are other people on the Board that have been working on this for years and may wish to be involved.

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Environmental/Lab Manager Rob Gollman said wind turbine complaints are handled by the environmental division of the Health Department in the same manner as all other noise complaints. He said the issue is infrasound, low frequency noise. Deslauriers said he could not say that he positively knows what the problems are. It takes investigation or the Health Department has to formally say that the problems that people are calling in about stem directly from infrasound and from there the Health Department could say they do not have the equipment, authority, etc., but the Health Department has never got to that point. Gollman responded that there is a noise ordinance which addresses audible noise, but there is not an ordinance which addresses infrasound low frequency noise, nor does the Health Department have any sort of measuring device to measure infrasound. As far as authority goes, Gollman wished to caution the Committee and the full Board that to do a study, if there is an ordinance that is drafted and passed, there would be a conflict of interest. The Health Department should not be doing the research, documentation or providing any help crafting an ordinance as the regulator who will be charged with enforcement. He wants to make this clear and said that another \$150,000 a year should be budgeted for staff and equipment for this.

Zima respectfully objected to this and said that he did not think that anyone was looking for two full time employees to work on this. He felt that this assertion was irresponsible, but Gollman disagreed. Gollman said complaints come 24/7 and he does not feel the Health Department would be able to meet program objectives. He did not want to have another fight to add employees like he did the last budget. Gollman said he did not want to be attacked on his ballpark figure and Zima said he just wanted to know what the figure included.

Gollman concluded that the Health Department does not respond to complaints of individual who list a number of medical symptoms such as sleep deprivation, headaches, nausea, vertigo, ear pressure, sinus issues, respiratory issues, allergic reactions, etc. He noted that he and his staff are not physicians and do not have training to figure out what the cause of these symptoms are and he does not feel that the County nor the citizenry should expect the Health Department to go out and determine causes of medical symptoms for individuals. Gollman continued that the Health Department operates under the Wisconsin State Statutes, the Administrative Code and the Brown County Code of Ordinances. If there is something that does not exist in those areas, it is not the job of the Health Department to create it, it is the job of lawmakers to do it. At present the environmental division does not have the legal authority to regulate wind turbines. Gollman realizes that nobody wants to hear that, but it is the truth and until and unless something changes, the Health Department is not going to do that.

Evans appreciated the comments made so far, but the thing that sticks out is Rob Gollman's comment that it is the job of the Health Department to do this and that they do not determine the causes of symptoms and there is no ordinance or equipment to measure the sound for regulatory enforcement. Evans said it is interesting that the Health Department does not want to get involved, but they already did get involved because they had a former Director that looked at all sorts of documents and did research and came up with a conclusion. It is Evans' position that the Health Department is involved due to the determination made by the former Director. He continued that the Health Department has a great charge of looking after the health and safety of the people of the community and when there are segments in areas where there are issues Evans felt it would behoove the Health Department to say that there is something not right. Maybe it is psychosomatic as Mr. Crawford says, but Evans disagrees with this. He also noted that there are problems happening all over the world; this is not unique to Brown County. Evans said he understands where Gollman is coming from but he gets frustrated when the Health Department says they are here to help the people of Brown County, but it is not their job to do this. Evans felt it should be up to the Health Department to say it is or is not wind turbines.

Gollman said the Health Department has no tool to measure this. He felt that Evans' assertion that it is not the Health Department's job to do this is a little twisted. Gollman said it is not the Health Department's job to make law, and it shouldn't be the job of the Health Department to make policy and further, it should not be the Health Department's job to do the study if the Health Department is then charged with enforcing the laws. Zima noted that the Health Department does have the right to make recommendations and Evans added that the Health Department has the utmost responsibility to be sure that the health and safety of the County residents is ensured.

Supervisor Linssen felt that Evans was implying that he wanted the County government to start doing medical research. Evans responded that there is already so much research that has been done and the proof is already there. Linssen disagreed that there is proof and said that there are things that need to be looked at. Zima said what is being asked is that the Health Department respond to what people feel are health problems and go investigate them.

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Linssen understood but said that looking at situations where there is not a diagnosis of a known causation essentially amounts to medical research to find out what the problem is which would be an expensive endeavor and definitely expands on what the Health Department does.

Evans asked Gollman if he knew what equipment would be necessary to measure infrasound. Gollman responded that he felt there would be equipment available, but noted that the Health Department does not have any currently trained individuals to use the equipment. Evans responded that he felt it would behoove the Committee to say that they do believe there are problems and to say they want to purchase the equipment and train staff to use the equipment.

Deslauriers apologized to Gollman for his earlier comments. He said if there is a cluster of common symptoms from one point source, the Health Department should look at that with honesty and integrity to try to find the root cause. That is all he is asking. Gollman responded that he understands and respects Deslauriers and where he is coming from and he is not trying to shirk any responsibility, but his point is that the Health Department is not experts on this and does not have the legal authority. It is a medical study and should be conducted by somebody other than who may be the enforcer if there is an ordinance. Gollman would support having a study done if it is deemed appropriate, but the Health Department is not the proper entity to do this. Deslauriers said he sees a disconnect from the information gathering to a study. He said we are not drawing conclusions at this point and what he is saying is to look at things such as onset of symptoms, meteorological conditions, talking to Duke and things like that. He asked why these things have not been done. Gollman responded that what Deslauriers is describing is a research study and Gollman thought the request was already made for the State to do such a study, but he does not believe the State complied.

De Wane said that if a group of people in a certain portion of the City would have common complaints, the City would buy equipment and then send people somewhere to learn how to use the equipment and that is the same thing the County would do. He said that if there is legislation or an ordinance written up by the attorneys with the help of the County Board, the Board will ask the Health Department to look into and provide information and that is all they can ask. Hoyer said this is looking forward to the future but the people in attendance want to know why this is not being done at this time.

Zima does not think that all that much is being asked for at this time, other than buying the equipment that is necessary which is a few thousand dollars and then having people go out when there are complaints and taking measurements. At some point in time, the Board may want an ordinance or the State to review the findings or something else, but we have to start somewhere. Zima is asking that the Health Department go out on complaints, measure what can be measured and report the findings back to the Committee. Evans noted that complaints come in on Sanimax, but every time the Health Department goes to Sanimax to collect data it is not a research study. Hoyer stated that that is different because an odor ordinance is involved.

Linssen said it sounds as if there are two different suggestions being made and both of them cost money. His question is if Evans and Zima are requesting to look at funding for an actual medical study to get medical conclusions or if they would be looking for simple logging of the complaints without having a medical professional there to make the final conclusion. Zima responded that they are not making conclusions and at a relatively low budget number a piece of equipment could be purchased and staff trained to go out and gather data for a year or two and then share it with the State and other health officials. The last thing he wants this conversation to do is to deteriorate into a battle about the budget or anything else. Zima is asking to put some attention to a problem that is affecting a fairly large group of people in the community and may become a larger problem if more turbines are put into the community. He felt we need to investigate as much as possible on the small scale we have now and find out what the property locations are and try to put our arms around it and benefit from the existing science. Zima felt a task force could continue to take in information to get a sense of things and the very least that should be done is get the minimum equipment necessary to do a cursory review of it.

Schadewald recommended a motion be made to direct the Health Department to report back with information as to what equipment and personnel would be needed to handle wind turbine complaints in a more thorough fashion based on the legal authorities which he felt needed to be examined. He said the Health Department is supposed to take care of the health of the County but noted that laws and regulations still have to be followed.

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Linssen's concern is that if an investment of equipment is made and the information comes forward and warrants a medical study, he does not want to duplicate costs. Zima responded that there is no duplication and all that is being asked for is to purchase the equipment and monitor the data and then look at the data and see what it shows.

Supervisor Van Dyck asked the Supervisors to add in the motion that a procedure be set up to document what they do in the future. He feels there needs to be a procedure that sets out how information is documented. Schadewald agreed and does not object to this being added to his motion. Zima said the procedure would be to go use the equipment and collect the data. Van Dyck replied that there is a procedure to be followed for everything the Health Department does and he feels if you do not go out with some sort of a process or procedure, all of the data that is collected is useless. He is not trying to create a mountain out of a molehill or looking to kill this, he is just saying that there needs to be a process that will be followed. Evans added that he would like to see a log and summary compiled of the complaints, similar to what is done with Sanimax. He felt that having a process in place where the public makes complaints and there is a summary of it would be appropriate. He does not think this is research and he felt it was a fairly simple thing to ask of the Health Department. Evans would also like to see the Health Department have a conversation with Duke Energies on this.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to open the floor to allow interested parties to speak. Vote taken. MOTION CARRIED UNANIMOUSLY

Barbara Vanden Boogart - 7463 Holly-Mor Road, Morrison, WI

Vanden Boogart said she is grateful so many people are interested in documenting the problem and addressing it because this is an area that is having a problem as if there was a toxic waste going into the water. There are documented toxins within the Shirley Wind project already documented by experts in that field and she does not understand why the Health Department would need to buy equipment and train people to use it when there are already expert acoustical people who have documented the levels within the homes where people are describing illnesses. De Wane responded that if she wants the County to get involved, the County needs to have equipment and trained people. Vanden Boogart said the State has already studied over 20 homes where people are complaining and that tests have been done that have documented levels. De Wane pointed out that there are also a lot of different studies that do not agree with those studies. He explained that the County needs to do their due diligence and do their own studies.

Vanden Boogart continued that she is not trying to be an obstacle to a County study but noted that Rick James has already looked at a lot of the test results and analyzed them. The County has already trusted him to be an expert to do this. De Wane understands what Vanden Boogart is saying and how she feels, but reiterated that the County has to do its due diligence. Linssen pointed out that this is also to set up a procedure for future complaints which is a big distinction and noted that this is not necessarily going to be dealing with past complaints. Vanden Boogart suggested the County have Rick James analyze future data because he is already familiar with the issues but Hoyer noted that we are not at that point at this time.

William Acker – 3217 Nicolet Drive, Green Bay, WI

Acker said it appears there are 2 major issues going on and what is trying to be addressed at this meeting is how the Health Department could address the problems that are occurring. He has no problem with setting up a process where if a complaint comes in, a staff member is sent out to investigate and take readings with a micro barometer. This is a device that is being used quite frequently and can be used by people without experience. The device is under \$500, but the data has to be read by a professional acoustician. Acker felt this would be a good process.

Acker said the other thing that is being struggled with is the proof that the readings they are getting are causing the health problems. This gets into an otolaryngologist who is a very highly specialized person on the workings of the inner ear such as Dr. Alec Salt who has done significant study. From Dr. Salt's viewpoint, he has no doubt that the pressure pulsations are capable of bringing on symptoms. Hoyer noted that he has contacted Dr. Salt to get his take on this and he received this reply, "At the moment I am no longer active in the low frequency sound/infrasound/wind turbine field and do not get involved in the topic as an expert. Our work certainly supports the fact the ear is more sensitive to infrasound than most would believe, but unfortunately it is not possible to connect this directly with health

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effects on humans or animals. I certainly have an opinion, but the science supporting the connection is lacking right now. For this and numerous other reasons, I am keeping out of it for now."

Acker was surprised with Dr. Salt's response as he has had discussions which were just the opposite. Acker also stated that when the first large industrial wind turbine was built in the United States, it brought on the same symptoms that people are having at Shirley Wind and that is not a nocebo or some disorder where people got stressed out because they heard about the symptoms. NASA and other government groups studied it and the assessment of what was occurring with the first wind project was impulses in the low frequency and infrasound range and that was confirmed with wind tunnel testing that they went on further to try to find out what was going on. Acker felt there was a substantial amount of evidence.

Acker continued that he wanted to address the other side of the issue. He said the Health Department is handling the other side of the issue and they gave the Director of the Health Department the job to see if she agreed with what the Health Department Board members had decided earlier. She submitted a report and then shortly thereafter resigned. It was Acker's opinion that the report was a bad report.

Deslauriers said his goal was not to implement a micro barometer-type procedure. His goal is that detailed information be gathered by the Health Department at the time of the complaint and he hopes the motion reflects that. He feels this is a very simple thing and will bring this to an end. He is not trying to make this onerous on the County, but feels that after five years, the community deserves some information gathering in a procedure that mimics the other health concerns in the County. His goal is simple but critical; he would like it stated that it is infrasound and there is no regulatory authority or do the basic information gathering and assess the data. Deslauriers thanked the Committee very much for their time and attention.

A timeline for the motion was discussed as well as the procedure that occurs when there are complaints regarding Sanimax. Schadewald does not think the Health Department needs to do anything more than they already do for complaints regarding Sanimax or any other complaints. Gollman explained the procedure for responding to complaints regarding Sanimax. Deslauriers said he does not even necessarily think that Health Department personnel need to physically respond to the household unless there is a determination of an actual direct threat at that moment. He said that looking at onset, what made symptoms better or worse should be examined. He said this is a different situation than an odor complaint and, as such, he does not think that every single thing that happens with Sanimax has to happen with this. He is saying that this is a slightly different situation, but the information is still needed to get to the truth. Deslauriers felt that residents would also let the Health Department personnel know what is important to them. Linssen said it sounds like what Deslauriers is requesting is that there is some sort of self-reporting recording mechanism in place such as a form that can be filled out when someone has a complaint. Deslauriers felt that would be a good, logical first step. Schadewald directed Deslauriers and Gollman to discuss this a little bit and come back to the Committee with an update.

Van Dyck disagreed with the last part of the discussion because he does not think it goes far enough. He said having a call in line where people say what problems they are experiencing does not do anything to help the people. Data collected is nothing more than people calling in saying what they are experiencing. There would not be information about what the weather was or what the wind is, etc. Hoyer said that once they collect the data they can go back and collect data regarding weather, etc. Van Dyck said if the data is going to be collected, it needs to be useful data. If it is not known what data to collect, maybe what is needed is a consultant to advise the County to be sure that the right data is being collected in the right way.

It was agreed that 2 months would be given for the Health Department to come back before the Committee. Zima felt that 1 month would be a more reasonable timeframe. Hoyer said that it is the will of the Committee as to how soon this should be done. Schadewald wanted to be sure that the Health Department had enough time to do a thorough job on this. It will be reviewed again at the next meeting.

Motion made by Supervisor DeWane, seconded by Supervisor Schadewald to return to regular order of business. Vote taken. MOTION CARRIED UNANIMOUSLY

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Motion made by Schadewald, seconded by Supervisor De Wane to ask the Health Department to report back what equipment and personnel are needed to monitor complaints and include the procedures to be followed going forward. Vote taken. MOTION CARRIED UNANIMOUSLY

3. **Communication from Supervisor Zima (for James Vanden Boogart): re: I am requesting that the attached document and the full report referenced therein be examined and discussed by the Human Service Committee and the Board of Supervisors and they take action to both officially dismiss Chua Xiong's decision regarding Shirley Wind and discuss possible actions to be taken to resolve the adverse health conditions at Shirley Wind, including consulting with an appropriate qualified environmental attorney to explore possible legal solutions. *Motion at May meeting: To hold item until the next meeting on June 29, 2016.* (Supervisors: Please refer to red packet of information provided by Brown County Citizens for Responsible Wind Energy at May County Board meeting).**

Hoyer recalled that earlier in the evening Zima indicated he was not interested in having Xiong's decision dismissed. Zima responded that he did not know what authority there is one way or another, but it seems that the information given to Xiong in support of the Shirley Wind people was basically not addressed and not spoken to and basically not part of the report. He continued that the industry side was upheld and Xiong resigned shortly thereafter. He wants to go back and re-examine all of the evidence and if it is felt that the Xiong's decision was not complete, however decisive it may have seemed, that it be reopened and reviewed and corrected in whatever way is available.

Linssen said it sounds like this is more of a procedural request that we take steps back or somehow overrule the previous decision. Zima responded that the Vanden Boogarts have not left a rock unturned and their review of things is dramatic enough that the Board should review it and recommend that some action be taken one way or another. Linssen asked Zima what he wants the Committee to do. Zima responded he wants the Committee to use their best judgment as to how to proceed and he wants the record to contain as much as we know and it should not be a one-sided record which he feels is what was in place when Xiong made her decision. Zima also noted he felt Xiong was under political stress as well.

De Wane indicated there is a lot of information and to do things right he felt this should be held for a month to give the Committee time to talk to the attorneys to find out what we can and cannot do. Schadewald wants the Committee to understand that the State Statutes with regard to the power of the Health Director are very clear. The Board of Health made a determination that this is health hazard, but only the Health Director can make the official health connection. He continued that if Xiong determined that the wind turbines were a health hazard and some Supervisor brought this to the Committee to overrule, it could create problems. Schadewald did not feel the precedent should be set of the County Board overruling the authority given to the Health Director by the State. He stated the Board can hire and fire directors and can provide information, but he did not think that this Committee should do anything other than receive and place on file because you cannot have politicians dismissing Director decisions. Zima wanted to get this whole thing front and center because it is controversial. The last thing he wants to have happen, which he believes is what the administration wants, is to throw this in the garbage can and he speculates that this is what they told Xiong to do. Supervisor Brusly stated that that is speculation and she felt that many Supervisors do care about this issue.

Schadewald said his idea was to receive and place this on file, but appoint the Human Services Committee as the task force and ask that this be put on the monthly agenda to receive all information. Zima said he would be happy with that and said that the Committee should hear from Mr. Vanden Boogart.

Evans talked about the suggestion to create a task force and noted that that was something that was suggested a number of months ago but then was pulled back. He provided the Committee with a timeline that has been put out by Dr. Jay Tibbetts, a copy of which is attached. The timeline goes back to 2010 and Evans noted that there is ample information including binders in the County Board office. He said a department head can make a decision and bring it before the oversight Committee and the Committee can then decide whether they wish to agree or disagree. Evans would like to see the Committee not accept the report and then take a vote. He would not want to accept it if he was on the Committee for a number of reasons including Xiong's limited expertise, the faulty scientific procedures that were done, the research, etc. Xiong had an assistant do a great deal of work on this and Evans did not think the assistant had the expertise to put together a document for Xiong that outweighs the credibility for MDs and Ph.Ds.

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Evans said the problem he has with the decision is that the more he looked into it, he looked at the faultiness of it. He felt an appropriate motion would be to not accept the decision of Xiong.

Evans continued that it is important to know how much work has gone into this and he appreciated the willingness of the Committee to want to learn about this. He said that this is Mr. Vanden Boogart's communication and he is a citizen and the Committee should hear him.

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to open the floor to allow interested parties to speak. Vote taken. MOTION CARRIED UNANIMOUSLY

Jim Vanden Boogart, 7463 Holly-Mor Road, Morrison, WI

Vanden Boogart said the reason Xiong's determination should not be accepted is because the consequences of her determination are not benign. They are not just local, they are global. The situation at Shirley Wind has been keenly watched across the globe. Wind developers are taking Xiong's illegitimate determination and using it for arguments for more projects like Shirley Wind. Unless this determination is rejected, the Brown County Health Department will be responsible for harm to public health across the globe. Xiong's words that say there is not a relationship between wind turbines and health concerns are being used in a number of documents at various municipal levels. Xiong's determination will be the legacy of Brown County's Health Department on a global scale unless the determination is called into question and not accepted.

Hoyer asked how many health departments have made any sort of declaration across the US. Vanden Boogart is not aware of any other County who has done this, but he is also not aware of any other public health officer that came up with a statement that went across the whole globe saying there is no relationship. Hoyer referred to Evans' timeline and asked about Xiong's predecessor, Judy Friederichs. He noted that she was the Health Director during all of the research and discussions but Xiong was left to review 256 documents. Vanden Boogart said the Board of Health made a motion to declare the wind turbines a health hazard which passed unanimously and he thought that Friederichs was resigned at that time. Evans pointed out that Friederichs retired.

Dr. Jay Tibbetts

Dr. Tibbetts said Vanden Boogart's comments are accurate as far as the process goes. The process came about from some citizens from Shirley Wind who made a request to the Board of Health to make a declaration of a human health hazard. The Health Director was instrumental in helping the Board of Health, but the Chair and Vice Chair of the Board operated relatively independently. Dr. Tibbetts continued that a number of citizens worked on putting together a binder of information and came to the conclusion that the industrial wind turbines at Shirley Wind are a human health hazard. This conclusion was reached by reviewing a number of studies, implementation of County Code 38.01 as well as State Codes. Zima said it sounds like Friederichs did not follow through with the unanimous recommendations. Dr. Tibbetts responded that the person that was most helpful was former Corporation Counsel Juliana Ruenzel who provided guidance on making the determination. Hoyer said he was not able to find information in minutes about this and Dr. Tibbetts noted that a few of the meetings they had with Ruenzel were held in closed session. Dr. Tibbetts noted that all kinds of information was submitted throughout the process by a number of individuals and everyone was invited to participate until the closing date in September. Schadewald noted that the Board of Health then gave Xiong a deadline to make a decision so that this did not drag on forever.

Vanden Boogart felt the decision was hurried and should not have been made in the timeframe it was. He said the goal was to provide Xiong with the full spectrum view of the evidence so a decision based on the maximum knowledge base could be made. Vanden Boogart continued that Xiong was provided with a great deal of information including records from Shirley Wind and a great deal of peer reviewed literature, studies, conference papers, expert testimony, etc. so that she would have everything available to make the decision. Because of the hurried timeframe, Vanden Boogart feels that pretty much everything was cast out based on the criteria she established and Vanden Boogart did not know if Xiong read everything or if her assistant, Carolyn Harvey did. Xiong indicated that only 5 of the provided documents were worthy of full review. He does not believe this has been done right and feels that someone has to do it over with oversight and do it right. He said when one person is in charge of a decision, it is dangerous.

Ackers said what Vanden Boogart is proposing is a good idea but noted that it is a lot of work to go through all of the documentation. He feels that there is one other option which would be to contact SAGE who is a professional

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publisher of articles by professors throughout the world and offer to pay them to review it and see if the study is a good analysis of documents. Acker said his preference would be for the Committee to spend the time to go over the documents and if the due diligence is done, there would be no questions that the analysis was bad.

James Mueller – N8710 Pine Road, St. Cloud, WI

Mueller indicated that he is from Fond du Lac County and the Fond du Lac County nurse is following along with everything that Xiong did. As soon as the decision was announced by Xiong in Brown County, it also affected Fond du Lac County and everything that Xiong did is being crammed down the throats in Fond du Lac County. Mueller said that Fond du Lac County is still abiding by Xiong's decision and he feels this is affecting people all around the world. This is going much further than Brown County and he felt that Brown County really needs to look at this and go through everything that was said and done to see if it was done properly. He said that he is not trying to throw Xiong under the bus, but the right answer needs to be found because this affects everybody.

Van Dyck is not sure that this should be received and placed on file, but he does definitely think that this needs to be deferred until next month to allow time to get a legal opinion as to what the Committee and Board can and cannot do. Van Dyck appreciated Evans' suggestion that the Board could take the position of not accepting Xiong's report, although he did not know if that speaks to what is being asked for. If the determination is one thing and the Board simply says they do not accept the report, he did not know what kind of weight that would carry. Van Dyck continued that ultimately the only way to get any resolution for the people is to reverse Xiong's decision, but he questioned whether that can be done. He also said if a determination is going to be made on this, there are reams of documents that will discount and are contradictory to what is being presented. If there is a fair hearing of what should and should not be done, all information needs to be looked at with equal unbiased. If this is looked at very one sided, the conclusion that is drawn will be brought into question. Equal information from both sides will need to be reviewed to make the appropriate decision.

De Wane felt that to solve the problem, this needs to make it to the next step and it should be sent to a court in another county for a determination as to if the decision is justified based on the facts. He does not feel that both sides were weighed in making the decision. De Wane has no problem holding this up for a month to get a determination as to the process. He is against receiving and placing in on file and feels that somebody does need to look into this and he would like it sent on for determination by someone from a higher level whether or not the determination is accepted. Linssen said he does not believe this can be brought before a Circuit Court without standing and further, it would need to be brought by Mr. Vanden Boogart. He said the party who feels they "lost" would have to bring this to court and it would be dealt with that way. For the Committee's consideration, Schadewald asked if we could request an opinion from the Attorney General's office as to what power the Committee and/or Board would have to dismiss or not receive the report. Linssen said that as this relates to State Statute, this could be done.

Zima felt whether it can be accepted or not accepted is beside the point and outside of the scope of what his intentions are. He wants Mr. Vanden Boogart to give his presentation and give a clue to the Committee that this was not as thoroughly vetted as it should have been and it deserves a broader review. He felt that this should be sent to SAGE for an opinion. Zima does not want to dump on everyone like they have been dumped on and he does not want to continue with the status quo. He felt the first step is sending this off and spending some money to get this evaluated and get another opinion. Hoyer said the first step is figuring out what the Board is within their rights doing. Zima said even if the decision cannot be reversed, there is nothing that says that the issue cannot be re-examined and redo the process and maybe come to a different conclusion. Zima felt that we had the authority to investigate and review and make recommendations to make our community a better place. Regardless if Xiong's report can be reversed, he wants the County Board to get involved in this.

Human Services Director Erik Pritzl said there appears to be 2 issues before the Committee at this time. The first is can the Human Services Committee or the Health Board not accept or turn over a decision by a health officer about a health hazard. That question needs to be resolved before this can move forward. Pritzl said the Attorney General would be a great place to get that question answered. The second question is with regard to the report and accepting it or looking at it again. The report is used to make the decision, but the decision itself is statutorily protected. The report is going to be looking at the procedures of the governing board or body in looking at how that plays off. This needs to be separated as a question for legal opinion because there is a statutory question versus the report and procedural questions as to how to resolve that.

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Evans noted that the County Board did pass a resolution in support of the Board of Health declaration that Shirley Wind is a human health hazard. He would like someone to make a motion to say send Xiong's documents to SAGE. He felt that if an answer is received by SAGE that says that everything was done correctly, fine. If they say no, from there a decision can be made whether the report is accepted or not based on the authority to do so. Linssen said that he is not interested in entertaining such a motion.

Deslauriers felt that this was a very simple issue because Xiong laid out very concrete criteria of what she would look for in reports. It is her prerogative to eliminate whatever she wants, but what she did was inconsistently weigh the reports and did not use the same criteria on the ones she accepted as opposed to the ones she rejected and then came to a conclusion that did not make sense in the level of standard and just said that there is no relationship. It is Deslauriers' opinion that those are the important things and noted that Xiong laid out in e-mail and publicly at the Board of Health meetings exactly what criteria she was going to use but she did not apply them consistently and then came to a bizarre conclusion that does not rise to the level of relationship which makes no sense. What he is asking is for the Committee to look at those basic things and if it means that the Committee does not agree with her, it says a lot to the rest of the world that all of Brown County is not in the shoes that Xiong determined. This would mean a lot to the County and other communities facing the same thing.

Pritzl reminded the Committee that there would be purchasing requirements and guidelines that would need to be followed if this were to be sent to SAGE. Acker said the purpose of a SAGE review would be to point out the weaknesses in the finding. Hoyer asked if it is the hope that if this is brought to a broader spectrum that it would be at the peer review level. Acker said that was exactly why it would be sent to SAGE, although he did not know how much something like this would cost. Linssen asked if there was a reason this needs to be at a peer reviewed level and Zima responded that the legitimacy of the decision is why this would be peer reviewed.

The purpose of sending this to SAGE is to utilize a body of people who are already familiar with a lot of this literature and who professionally assess the validity of the literature and can see the literature that has been submitted and then see how Xiong dispositioned each of those documents in her summary log and the conclusion she reached. This could be a more efficient way of getting an assessment or judgment of validity of her decision. Linssen understood that and noted that he had been an editor for a peer review magazine in the past, but does not understand why we need to hold Xiong to the same level because she is not a doctor and he does not think the Board should be expecting that level of work in this type of report. He did not think it was fair to Xiong to hold her to that level and felt we are going down the wrong path of having this debate. Linssen said it seems like what is being asked for is a second opinion of the opinion. Evans said that what they are asking for is an opinion to see if it was done scientifically and in accordance with parameters. Evans said he is proposing to spend taxpayer money to get to the answer to see if Xiong went about this in a proper scientific manner because that is what her job entailed. He said that just by reading the red binder that was provided by Mr. Vanden Boogart you can see that there are some questions.

Dr. Tibbetts wished to echo what Deslauriers said. Xiong gave a presentation and a good part of the presentation was how she was going to go about her task. The problem is that she then violated the whole thing. This is the big issue and he questions how anything can be made credible with that. Linssen said that on one side is the politics and on one side is the law and he just wants to be sure that we are not just trying to merge anything together. Hoyer noted that the oversight the Committee would have would be to discipline Xiong or whatever but again, this is a unique situation because it has a legal standing and we need to pick that apart.

Acker said that he has been a peer reviewer for a number of years and every magazine has a peer review process and the process is very important. The reason to go to SAGE with Xiong's decision would be to see if the processes she used to get to the decision were good processes or if she missed something in her processes. This is a very important process and from Acker's viewpoint, the things Xiong did are bad, but he would like to hear what SAGE would have to say.

Barb Vanden Boogart said that no matter how you arrive at the decision, just using plain common sense in looking at what has been presented to the Committee already, and laying down any politics, it is clear that what Xiong did is lacking in integrity and thoroughness. At the very least, what the citizens who care about this issue intensely and those who are suffering in Shirley Wind and around the world want done is to say publicly that we as a body who oversees the Health Department think this document lacks integrity and was not done properly and from our

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perspective, whether it is legal or not, it is not valid because Xiong did not use the science. Vanden Boogart feels people need to know that the Committee's authority speaks about what Xiong did and there needs to be some accountability in this nation for each person on a board, committee, etc. to be held accountable for doing their job correctly and Xiong did not do that. Xiong is no longer here to be reprimanded, but, none the less, she needs to be held accountable for the poor and weak job she did, just like the people in Flint, Michigan.

Motion made by Supervisor Schadewald, seconded by Supervisor De Wane to return to regular order of business. Vote taken. MOTION CARRIED UNANIMOUSLY

De Wane thanked those in attendance for coming to the meeting and sharing their thoughts with the Committee. He has been watching this issue and is glad to be on the Human Services Committee so he can work on this. He would like to have this matter held for a month so the Committee can take the material and as individuals determine whether what Xiong did was done correctly. He said it is important for the Committee to review all of the materials and then a recommendation can be sent to the full County Board. Committee members can each make their own decision as to if what Xiong did was done in the proper manner and not under duress. De Wane would also like this issue sent to the Attorney General for an opinion as to what can and cannot be done with regard to the decisions. Finally, De Wane would like this matter sent through Administration to SAGE. He felt that the Committee really needs to do their due diligence because it affects the lives of people in Brown County and he wants to make sure this is done correctly and done well. De Wane believes that how the decision was made was not proper, but each Committee member needs to form their own opinion.

Linssen agreed with De Wane's first two points, but feels that the third suggestion to send this to SAGE would be trying to make a political statement instead of addressing the science and he feels there are better options available and for this reason, he would like separate votes on three separate motions.

With regard to sending this to the Attorney General's office, Zima said that Xiong did what she did and a lot of people are disagreeing with what she did. He feels the third motion was the most important and feels that we need to determine whether Xiong had the right to make the decision or not and it is his opinion that she did. He noted it will take a long time to get an opinion from the Attorney General's office. Hoyer said a vote would still be taken and he would like to see this mimic what Pritzl said in terms of the two different areas.

Van Dyck said he is in favor of sending this to SAGE because he feels it is an important step and an important decision to look at. However, there is also an equal amount of weight that was given to the Health Board in making their decision and he questions why their decision making process followed a similar criteria. If we are going to be consistent and are going to say that Xiong's decision making process did not follow the proper procedure and was not sound, there are an awful lot of people relying on the fact that the Health Board said what they said and what was the criteria and process that they used to reach their decision. Linssen said he would support this. Schadewald said he would support the motion to get a proposal from SAGE or a similar organization but he feels there needs to be further discussion on where to send it because if the truth is what is wanted, why don't we send all the information to other health directors. Schadewald would prefer to concentrate on the people in Brown County, but once you start going through process, it is an argument that everyone has an opinion on. He has agreed with Zima from the start that we want to help the people of Brown County.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to hold this up for one month to determine whether or not it was properly done. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to have our attorneys send this to the Attorney General to see what we can and cannot do. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to send this through Administration to get a proposal on the costs involved with sending information to SAGE or a similar organization and bring it back. Vote taken. Nay: Linssen. MOTION CARRIED 4 TO 1

Motion made by Supervisor Linssen, seconded by Supervisor Hoyer to send the conclusion by former Health Director Chua Xiong and the conclusion by the Board of Health to an independent review agency. Vote taken. Aye: Linssen, Hoyer; Nay: De Wane, Brusky, Schadewald. MOTION FAILED

At this time a short break was taken.

Human Services Department

4. Examine scheduling issues at Community Treatment Center – *standing item per motion at April 2016 meeting.*

Hospital/Nursing Home Administrator Luke Schubert reported that a committee has been formed to work on this and Tom Smith from Human Resources has agreed to chair the committee. Two meetings have been held and the committee voted to suspend the holiday schedule as that seemed to be the largest sensitive area. Schubert stated that the holiday schedule had an A – B rotation system that meant that if you worked Christmas Eve this year, you would work Christmas Day next year and vice versa. They reverted back to the old system so if you are scheduled to work on the day of the week that the holiday falls on, you work that holiday. Pritzl said he attended the meeting where the holiday schedule was discussed and he wished to add that it did show how the committee is going to be challenged in sorting through what policy decisions are and what scheduling decisions are. He said the committee could not get to scheduling discussions without going through this first, so that is why the holiday schedule was taken off the table after the Fourth of July.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

5. Resolution re: Reorganization of the Human Services – Community Treatment Center Table of Organization.

Schubert said the basis of this move is to get more utilization out of the management positions by focusing the food service supervisor on production and employee management.

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

6. Executive Director's Report.

Pritzl referred to his report contained in the agenda packet. With regard to the mental health initiatives that were highlighted in the report he noted that the Day Treatment Center RFP period has ended and the scoring committee is now doing their work and this is proceeding as it is supposed to. Detoxification services should be starting in July. They are working on a few protocols and procedures on the intoxicated population versus the incapacitated population. Pritzl said this sounds like an odd nuance, but it is very important and he noted that by statute the County is required to work with incapacitated individuals and their situations while intoxicated individuals fall under slightly different statutory requirements. Pritzl continued that they are making sure that they are following all of the appropriate procedures and that they have the right resources lined up. He said they have a nice procedure drafted for people that would go to Bellin for detox but there needs to be a next step in that process which would be attending an orientation group and assessment which would then determine placement criteria. The time from orientation to assessment is 5.3 days on average and Pritzl noted they did process improvement on this a while ago which was helpful. They just need to clarify the procedures so they can make law enforcement and medical providers aware of exactly what is going to happen.

Schadewald asked what the procedure would be for incapacitated people. Pritzl explained that most likely law enforcement will bring the incapacitated person to an emergency department for medical clearance and if they are cleared then they would go to Bellin for detoxification services.

Linssen indicated he spoke with St. John's Shelter who explained that they had some concerns over the intoxicated versus incapacitated distinction and how those services would be able to assist their facility and their residents, especially when it came to people who are heavily, heavily intoxicated not being eligible for the service because they are under their own control and despite how intoxicated they are they would not qualify for these services. Pritzl

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noted that he has spoken to St. John's about this and that is what they are trying to resolve. Pritzl will keep the Committee updated in this regard.

De Wane said the City of Green Bay works closely with St. John and the City has a "no serve" list and he will look into this because that may help. Linssen appreciated what De Wane was saying but noted that he was asking more about the funding for services.

With regard to mobile crisis, Pritzl noted that the Crisis Center has filled $\frac{3}{4}$ of the positions they can support with the additional funding. The staff has to be trained and go through required trainings and Pritzl noted that they have not seen an appreciable change in hours yet because the staff was just hired in May. He said they do track hours of mobile face to face contact and he feels those hours will be going up in the next month. Pritzl continued that the turnover issues seem to be resolved and noted that he has spoken with Family Services and with the change to emphasizing more mobile and going away from the center somewhat, Crisis Center anticipated that some people would leave. Hoyer asked if the County pays them for 4 staff regardless of how many are on staff or if we only pay for what they have. Pritzl has been told that Crisis Center has not invoiced for any additional amounts while they are going through the ramp up.

The last part of the mental health initiative is transitional residential treatment and this is something that they continue to look at. They have been meeting and will get this down to a limited number of options for the group to assess. They are trying to figure out how this plays into purchasing versus providing and using the County's facility versus not. The numbers in terms of the facility are increasing and they have been looking at this very closely. Pritzl said there are 20 crisis diversion beds at one diversion facility and the CBRF has 15 beds. They have talked about consolidating and Pritzl is looking at this. Pritzl said that there were 2 days that exceeded 20 people in the crisis diversion beds from January through April. In May there were 6 days that exceeded 30 and 3 days that were at 20. June could bring more seasonal issues as St. John's closes for the season. As it stands right now, there could be a capacity issue in terms of crisis stabilization. Schadewald said at some point a determination needs to be made as to how to organize this because the capacity is 35 but for the whole year, that capacity has not been met. Schadewald does not want to be spending money on facilities that are not at capacity when there are needs in other areas. Pritzl did not disagree with this and said that he will keep the Committee advised and updated.

Pritzl also said that someone raised the issue of funding and sustainability of the mental health initiative. He said that all of these phases of the initiative have been set up to pro-rate months of service. He also said he has received no indication that there will be a reduction in funds next year, but ultimately that is the decision of the County Board. Hoyer asked if any leftover funds from this year will be carried over and Pritzl said that that has not been decided. Schadewald felt that more money would be needed for next year and he would not like to see too many more initiatives started until what is already in the works is up and running efficiently. Pritzl said he sees people that need services and to get these things in place at acceptable standards takes time. Ideally he would have like to have seen it get farther than it has, but he also is able to look back and see that there has been progress on all of the initiatives and 3 of them are implemented. Considering all of the needs of his department and the scope of work that gets done on a daily basis Pritzl said what has been done is a pretty good accomplishment. Hoyer asked if Pritzl felt that the ad hoc committee needs to meet again soon and Pritzl said that a meeting should be probably be held towards the end of July or early August.

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to receive and place on file. Vote taken.
MOTION CARRIED UNANIMOUSLY

7. **Financial Report for Community Treatment Center and Community Programs.**

Finance Manager Eric Johnson noted that the finalized expenses for community programs are now available and they came in just below budget overall.

Motion made by Supervisor Schadewald, seconded by Supervisor De Wane to receive and place on file. Vote taken.
MOTION CARRIED UNANIMOUSLY

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8. **Statistical Reports.**

- a. **CTC Staff – Double Shifts Worked.**
- b. **Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Hospital.**
- c. **Monthly Inpatient Data – Bellin Psychiatric Center.**
- d. **Child Protection – Child Abuse/Neglect Report.**
- e. **Monthly Contract Update.**

Pritzl recalled there was a question last month as to why the CTC double shifts worked report was included in the agenda packet. He dug into this and found that last April he asked for this to be included in the report because there is a resolution going back to 2009 as to hours an employee worked during a 24 hour period. The resolution referenced people working beyond 12 hours and called for department heads to report to the standing committee whenever a 12 hour shift is exceeded. Schadewald felt that since that resolution was pre Act 10, it should probably be reviewed.

Pritzl also advised Brusky that he did some research on a question she asked last month regarding whether insurance is required before an adolescent is admitted to Bellin Psychiatric Center and he found that it is not a requirement. He said that insurance can cover the stay or the County is the payer of last resort in an emergency situation however, County case workers do work to get insurance coverage, such as medical assistance.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to suspend the rules to take Items 8 a-e together and to receive and place them on file. Vote taken. MOTION CARRIED UNANIMOUSLY

9. **Request for New Non-Continuous Vendor.**

Pritzl recalled that at the last meeting Linssen asked for more information in terms of contracts and noted that the report has been revised to provide more detail on the contracts.

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

10. **Request for New Vendor Contract.**

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Other

11. **Audit of bills.** No bills, no action necessary.

12. **Such other matters as authorized by law.**

Motion made by Supervisor Schadewald that the entire Human Services Committee become the task force for the collection of information on the Shirley Wind Farm project. *Motion withdrawn.*

Hoyer asked if Schadewald is proposing that this be a standing item in our next meeting. Schadewald said that that may be a better way to handle it and he will write a communication on this. He wanted to be clear that he does not want the Committee to drop the ball on getting information and he firmly urged the Committee to get some of the previous documents in this matter. He understands the concern about hearing testimony every time, but he would like to see the Committee be more the conduit for gathering information. Linssen said he would be agreeable to receiving paper reports, but he does not want to get into a situation where there is testimony every month. Schadewald said the Board of Health meets every two months and gets a lot of testimony in many forms. He would like to create some sort of depository of information that people could look at. Pritzl suggested that perhaps the Committee could invite individuals to attend meetings if there are specific questions that need to be answered. Recording Secretary Alicia Loehlein urged the Committee to utilize the Board Office as well. She said that many of the questions that were asked have been discussed at previous meetings and a lot of the information could be answered by reading prior minutes.

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Paul Lindy – 1011 Doty Street, Green Bay, WI

Lindy said his background is healthcare and he was responsible for 72 specialty outpatient clinics early in his career and then was a consultant for a number of years. He is very concerned about the mental health of people who are attempting suicide, and then are stitched up and released back on the street. Obviously there is an issue that causes a person to get to that situation. In one case there was an effort for a 3 party referral and it was denied and these are some of the things that he will continue to follow up on to find the best avenue. Pritzl asked who denied the 3 party referral and Lindy said it was the facility. There was a question as to what protocols were followed and what category the patient fell into. Lindy would like to know the quickest way to get the minutes of today's meeting. He was advised that the minutes would be available online upon their completion.

A brief discussion was held regarding the next meeting date and July 21, 2016 at 5:30 pm was selected.

13. **Adjourn.**

Motion made by Supervisor De Wane, seconded by Supervisor Brusky to adjourn at 9:22 p.m. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Recording Secretary

Therese Giannunzio
Transcriptionist

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PROCEEDINGS OF THE BOARD OF HEALTH MEETING
TUESDAY, May 10, 2016
5:00 PM

Present: Jay Tibbetts, Joe Van Deurzen, Harold Pfothhauer, Richard Schadewald, Karen Sanchez, James Crawford

Excused: Susan Paulus Smith

Others Present: Debbie Armbruster, Rob Gollman, Ann Steinberger, Colleen Messner, Christine Davidson, Erik Pritzl, Executive Director for Brown County Human Services, Peter Denil, Lions Club, Erik Hoyer, Brown County Supervisor District 4 and Human Services Committee Chair, Patti Zich (minutes recorder)

1. Call to Order, Welcome, and Introductions

Jay Tibbetts called the meeting to order. Erik Pritzl, Executive Director of Brown County Human Services, Colleen Messner and Christine Davidson from Hearing and Vision Program, Peter Denil representing the Lions Club of Northeast Wisconsin, and Erik Hoyer, Brown County Supervisor and Human Services Committee Chair introduced themselves.

2. Approval / Modification of the Agenda

MOTION: To approve the agenda as presented.

Schadewald / Pfothhauer

Joe Van Deurzen would like to strike agenda item 9. He states this is a contract that the County enters into with Duke Energy and questioned if this was a health concern. Mr. Schadewald stated we needed to get clarity and that it is not a contract. He stated the Board of Health would have some influence on where that money would go.

MOTION CARRIED

3. Approval of Minutes of March 8, 2016

MOTION: To approve the minutes from March 8, 2016.

Van Deurzen / Pfothhauer

Jim Crawford requested changes.

MOTION: To approve the March 8, 2016 minutes as corrected.

Van Deurzen / Pfothhauer

MOTION CARRIED

4. Mental Health Initiative – Director Erik Pritzl

Erik Pritzl indicated his department is engaged in a mental health initiative which the County Board funded in November. The first part of the initiative was expanding mobile crisis services, which is a team or individual who treat the person experiencing what would be considered a crisis. It could be substance abuse related, mental health related, suicide, voluntary or involuntarily hospitalization. These services treated people typically by phone or at the crisis center which meant people were being brought places. It required people to move around. Instead of moving people, they talked about bringing the services to the person—to a school, home or police department. They expanded those services by one crisis counselor.

Mr. Pritzl continued that they also looked at detoxification services. As a rule the department was not funding detoxification services for persons who were incapacitated. They had issues with this in 2012 and their treatment center could not take people after that point. For that primary reason, if it's co-occurring with a mental health issue they could. People being seen were incapacitated and not receiving treatment other than an emergency room visit. This brought back some services in that area to address the chronic needs and incapacitation needs of individuals. That service is in place in terms of a contract and they are refining the terms of intoxicated versus incapacitated; who can be treated and who are they responsible to treat within the funding available.

The third part of the initiative is a Day Report Center which the Board also just approved will primarily serve the criminal justice population; people potentially in the jail setting who could be safely in the community because their offenses were non-violent offenses. They are probably in a low cash bond situation or barrier exits that are requiring them to stay in a jail setting where they are getting some mental health services. The Day Report Center would integrate the behavioral health services, substance abuse counseling as well as the criminal justice monitoring functions and vocational support and act as a check in center – not a residential center. That is out for proposals which are due back in two weeks. It will be July or August before that is in place depending on negotiations.

The fourth initiative is a Transitional Residential Treatment Center. It originally conceived of how they could better utilize the space at the Community Treatment Center to address the population with substance use needs, post-detoxification. They have to go through regulations and program applications and numerous steps to put that program in place. It could either be operated by Brown County or by a partnership with another provider.

The overall package is 1.1 million. Each piece, as they are brought forward is prorated for the amount of time they expect to be in operation this year. It is an attempt to bring those services to people without it requiring some of those other interventions. It connects to Health through the Community Health Improvement Plan and access to mental health services and gaps in mental health services.

Joe Van Deurzen asked if there were mental health crisis people working at the Jail or is that something they have to come out of the jail for. Erik stated the jail is responsible for mental health services within the jail. The problem they saw was when people were leaving jail. Who was picking that up? Who was helping them with that transition? One of the things he asked for in his budget was a position devoted to that transition. That person has started and they are developing protocols and trying to get more interest on the inmate side. They would like to engage them and figure out what services they are going to use when they leave and do a warm transition instead of a pamphlet, brochure or referral. There will be someone, if they are willing to work with them, to help them access services.

Jim Crawford asked about the Community Treatment Center. Erik indicated they have a 16 bed psychiatric hospital, 15 bed community-based residential facility which is a crisis stabilization non-secure setting and voluntary. They have a 63 bed nursing home which 61 beds are for residents with primarily behavioral health needs, and the other two beds are for emergency protective placements.

Dr. Tibbetts stated there was another mental health facility coming to town and wondered if they are cooperating with Human Services. Erik indicates they have talked to them and shared information.

5. **Environmental Division Update** – Rob Gollman indicated in the handouts is a brochure and a copy of a survey that we are going to be conducting with our operators. Those items will be included in our license renewal which runs from July 1st to June 30th of the following year. He states they are busy getting approximately 1,200 license renewals ready. Temporary events are also coming up.

Rob talked about the copper and brass issue. They are seeing a surge in some taverns serving a drink called the Moscow Mule which is typically served in an all copper mug. It is a violation of the Wisconsin Food Code to have any acid beverage or food in direct contact with copper or brass which is composed of copper and zinc. They also see beer being dispensed from beer faucets. Many of these old style faucets are chrome plated brass and when the chrome erodes it goes into the brass and that brass and copper is going into the drink. One of their sanitarians spoke at a WALHDAB meeting to bring to the attention to the rest of the state. They have been ordering people to discontinue use and go to a stainless lined copper mug. Replacing with all stainless units is cost effective for the operator and far more sanitary. Mr. Schadewald asked if we were informing the public. A discussion was held regarding different ways to get the word out to the community. Debbie indicated the Health Department would post something on Facebook.

Rob indicated they will be sending out the anonymous survey electronically. Rob also stated they are exploring the idea of a food safety advisory committee. They will include something with the renewal to see if there is interest. Rob has been working with Ann and a health educator on the rabies quality improvement project and new electronic rabies control order. We are also putting together a training PowerPoint presentation as there is

turnover. He is also looking into the ordinance. They currently refer problem cases to the District Attorney's office and it would be easier if they could issue citations.

Mr. Schadewald asked about staffing for outdoor festivals. Rob indicated we are currently full staffed with 7 inspectors. Rob is meeting tomorrow with his staff to discuss how they are going to cover the events. Rob talked about the merge between the Department of Ag, Trade and Consumer Protection and the Department of Health Food Safety and Recreational Licenses Divisions. We are currently agents for both of those State agencies and changes are coming.

Jim Crawford got a complaint on a vacant property on Green Bay Road and Rob and Jim agreed to discuss the complaint after the meeting.

6. Nursing Division Update – Communicable Disease, MCH – Vision and Hearing

Communicable Disease - Ann Steinberger handed out a summary regarding communicable disease. The flu season has peaked nationally and it has been milder in comparison to previous years. In regard to tuberculosis they have one person with active TB disease. He has now completed his medication. Ann states Elizabethkingia as of last week; there were 60 cases of this in 12 counties in Wisconsin. None of them have occurred in Brown County. There 2 cases consistent with the Wisconsin outbreak strain outside of Wisconsin; one was in Michigan and the other was in Illinois. The source of these infections is still unknown. Wisconsin Department of Human Services and the Center for Disease Control (CDC) continue to investigate the outbreak. As far as the Zika virus disease, cases reported were 472. They are sending specimens down to the CDC and the State and they have all come back negative. Ann also indicates they are notified of new HIV cases. There is a nurse that works with Partner Services and they have cases of newly diagnosed HIV. They work with the individual, make sure they are aware of the services and encourage testing of their partners. They are also part of a group of infectious disease providers which talks about what is going on. If there is any information that is passed along to them from the State, they send out an email to those involved with infectious diseases.

MCH – Vision and Hearing - Colleen indicated Peter Denil from the Lions Club contacted her with a proposal to partner with them to use a device they have for vision screening. Last year in Brown County we screened 12,293 children for vision problems. They screened the targeted grades of 4K, 5K, first, third, and fifth. For hearing, they screened 7,267 children for hearing issues with the targeted grades of 4K, 5K, and first. They go into 70 different schools within Brown County. For hearing screening, they currently utilize an Audiometer, OAE (Oto Acoustic Emissions) and Otoscope. For vision screening, they utilize visual inspection of eyes, Snellen Eye Charts and a variety of other charts for different developmental levels and language barriers. They use a Random Dot E screening as needed when unsure about eye alignment issues. They do near vision chart by request and will screen for color vision by request. For years, and continuing to this day, the Snellen Eye Chart has been used to measure visual acuity, how "sharply" we see letters from 10 feet away. This is only one of a battery of tests utilized by eye care professionals, and the primary chart used in pediatric vision screenings. It is an industry standard but it is sometimes difficult to administer to small children. It can be subjective and is not foolproof.

The Lions Club had purchased 10 cameras for Northeast Wisconsin. It is a computer assisted Photorefractor / (auto refractor) which uses low level infrared light to the retina, taking 23 camera shots of the eye in less than 2 seconds. The measuring principle is based on photo-retinoscopy. From a distance of three feet (the camera lets the screener know if the distance is too far away or too close). An infrared light is projected through the pupils onto the retina. Depending on the refractive error, the reflected light forms a specific brightness pattern within the pupil. The assessment is non-invasive and the student feels nothing. The child simply sits down and looks into the camera. It takes the series of photos of the child's eyes using infrared light, all within no more than two seconds. By analyzing those images, it is able to determine if their vision is age appropriate and the device will instantaneously display the name of any likely problems. In just seconds, Spot provides immediate, comprehensive, and reliable screening results. A one-page summary can be printed, allowing for further analysis and informed decision making about the need for a follow-up examination and treatment by an eye care professional. Either the child will be in range or out of range and then the child should have a comprehensive eye exam by an eye care professional.

They piloted this in spring and just got the results back. Christine Davidson gave examples of the Photorefractor passing the child but their screen did not pass the child. They sent a letter home to the family and they did bring the child to the eye doctor and the child did get glasses. They also had passed a child on the charts but the Photorefractor said this child needed an exam and did indeed end up with glasses. It is not 100% but it is a screening tool.

Colleen demonstrated the Photorefractor on a member of the Board. Peter Denil from the Lions Club indicated they are screening the younger children right now. They have approached a medical college to be a research partner so we can do a validated research study and comparative analysis. Peter indicated it will screen 95% of the population. Their proposal is they would lease the camera to the County for a nominal fee. The County would have to pick up maintenance, if any. The cameras are about \$7,000-\$8,000 each.

Debbie Armbruster stated we just secured an adult immunization grant. They decided they wanted to work on influenza as it impacts not only the adults but the family as well. This is not giving vaccines. It involves going to entities which provide influenza vaccines and make sure they get the information in the Wisconsin Immunization Registry (WIR). She indicates they need to increase their adult influenza rate by 8%, which means 16,100 more adults need to get it in Brown County. A number of providers are not putting the information into the WIR and they will do a lot of promotion. They also need to update the deceased in the system. They also purchased some adult influenza vaccine for a very reasonable cost and will be giving out 500 doses at least.

Debbie also states they are having a This is Public Health Event and gives credit to Anna Destree for coming up with the idea and her entire department has embraced this. They have secured Shopko Hall on October 15th. Debbie indicates they are an unknown entity who does a lot for this community.

Debbie also reported that the Health Department will be having more mass clinics. By doing the mass clinics they don't have to ask for insurance information so they can give to everyone and they will reach more kids and adults. They have secured dates for mass clinics at St. Willebrord Parish, Back to School Store, Head Start Days and WIC program. They will also be giving immunizations at the "This is Public Health" Event. They will be meeting with schools to talk about being able to hold clinics in the schools. The State is encouraging them to work with the Aging and Disability Resource Centers. They have a great relationship with ADRC will meet to services.

Debbie states they recently started the ages and stages boards. The board goes through many different ages from 2 months to about 48 months. It goes through the social emotional part of it but also the developmental part of it. Their nurses go to local events to use the screening tools so parents are getting more knowledge about what their child can or cannot do. They score these questionnaires and then will refer to the appropriate source along with their primary provider. Mr. Schadewald asked if we offer immunizations to county employees and Debbie indicated not if they have health insurance.

7. Comments from the Public

William Acker, 3217 Nicolet Drive, Green Bay, WI. Mr. Acker presented a critique of what Jim Crawford spoke about at the last Board of Health meeting which is an article from an industry and funded report by the American Wind Energy Association and the Canadian Wind Energy Association. These associations mission of this industry is to promote the growth of wind power. Bill submitted two critiques that were done on that document and Mr. Acker's own critique which mostly focuses on what constitutes a Nocebo Effect or Somatoform Disorders.

Jim Vanden Boogart, 7463 Holly-Mor Road, Greenleaf, WI. Mr. Vanden Boogart stated their group's concern and comments have to do with former Health Director Chua Xiong's decision regarding Shirley Wind, including her review of the documents submitted to her, and those who assisted her in that review. Mr. Vanden Boogart stated the statements being made on behalf of Brown County Citizens for Responsible Wind Energy (BCCRWE) and its members are based on the best information available to them, and they are not a personal attack against Chua Xiong or others involved but rather, their intent is to present evidence that demonstrates that Chua Xiong's conclusion regarding wind turbines and health concerns lacks validity and that her conclusion was based on a very flawed process by which submitted evidence was selectively reviewed and inconsistently weighed.

He states BCCRWE was very involved in submitting documents to Chua Xiong and the Board of Health, documents which, in their opinion, provided broad and compelling evidence demonstrating the known potential for adverse human health impacts from industrial wind turbines sited in proximity to human populations.

In support of the evidence submitted earlier by Susan Ashley in the "Blue Binder", he states they submitted additional credible evidence from world-recognized experts, including peer-reviewed papers, health impact studies of wind project residents, expert witness testimony from several recent court cases regarding health impacts from wind turbines, papers from professional acoustical conferences, and much more. He states these documents provided a full spectrum view of the evidence necessary to make the determination that wind turbines are known to have the potential to cause adverse health effects for some residents living in their environs. Jim continues that despite all of the evidence at her disposal, Chua Xiong concluded that there is not a relationship between wind turbines and health concerns, and therefore, concluded that the Shirley Wind turbines are not a human health hazard. It is their opinion that in arriving at her conclusion regarding Shirley Wind, Chua Xiong failed to perform her due diligence by failing to review the majority of the evidence submitted to her; failing to consider the entire body of evidence, electing to only conduct a literature review that employed highly restrictive selection criteria, and that was not based on any Board of Health directive or any requirement imposed on her, failing to apply her own self-limiting selection criteria to 3 of the 5 documents that she *did* select as *having merit*, while using those same criteria to reject *every* document submitted to her by experts across the globe demonstrating a relationship between wind turbines and health concerns, characterizing them as being "*without merit*" for one reason or another, failing to broaden her understanding of the issue by speaking with experts having extensive experience with, and knowledge of, the potential health impacts from wind turbines; failing to accept an offer from Richard James to set up a Skype discussion and an offer from Carmen Krogh to make a presentation, failing to speak with Board of Health members regarding their five years of experience dealing with the issues at Shirley Wind that led to their human health hazard declaration, failing to meet with BCCRWE who had been working with affected residents and researchers, failing to interview most residents who were affected, failing to spend any time in the abandoned homes, failing to select an individual to assist her who had the specific education or experience, failing to conduct her ongoing review process with transparency or accountability, failing to allow the Board of Health to review her findings or provide input, failing to publicly acknowledge her own repeated personal adverse health impacts experienced at Shirley Wind, failing to employ the precautionary principle to protect the health of Shirley Wind residents.

Mr. Vanden Boogart continues that after making her determination, Chua Xiong failed to answer questions posed by Board of Health Vice Chairman Dr. Jay Tibbetts at the January 12, 2016, Board of Health meeting, failed to make herself available to meet with interested parties, gave a PowerPoint presentation to the Human Services Committee that appears to have been prepared by Jeanne Hewitt, rather than herself, describing the process that was used to review documents and reach her conclusion. Mr. Vanden Boogart continues she failed respond to certain questions asked of her by Chairman Patrick Evans at the January 27, 2016, Human Services Committee meeting and answer questions asked of her by the public at the January 27, 2016, Human Services Committee meeting. Mr. Vanden Boogart states she failed to appear at the February 24, 2016, Human Services Committee meeting and March 8, 2016, Board of Health meeting. She further states Ms. Xiong resigned from office, effective March 18, 2016, making herself unavailable to respond to any of the many unanswered questions.

Mr. Vanden Boogart alleges that emails paint a picture of a Health Director, who found it difficult to find time to review the submitted documents, delegated much of the document review to Carolyn Harvey and relied on Jeanne Hewitt for direction in reaching her decision. He believes Ms. Xiong may have been influenced by a much-discredited document written by pro-wind propagandist Mike Barnard. It is Mr. Vanden Boogart's belief that Chua Xiong seemed to be more concerned about the cost and difficulty of winning a lawsuit than about protecting the health of Shirley Wind residents. BCCRWE is of the opinion that Chua Xiong failed the test of due diligence and that her conclusion is without merit, and should be formally dismissed. Mr. Vanden Boogart also believes several experts who have reviewed the documents and evidence that Chua Xiong had have come to the same conclusion, and have publicly stated their positions including Robert Rand, Jerry Punch, PhD, Stephen Ambrose, Steven Cooper, Paul Schomer PhD, Richard James, Dr. Robert McMurtry, and Carmen Krogh. Mr. Vanden Boogart states in these documents is a Professional Caution issued by Institute of Noise Control Engineers member Robert Rand regarding Health Director Xiong's disregard of his professional judgment regarding adverse health conditions at Shirley Wind. Mr. Vanden Boogart states BCCRWE is requesting that the Board review the facts presented and take the necessary steps to have former Health

Director Chua Xiong's determination regarding Shirley Wind formally dismissed, and to take action to protect the health of adversely affected Shirley Wind residents.

8. Shirley Wind Health Complaints

Jim Crawford would like to hear the public at every meeting and the progress of the Shirley Wind story to keep apprised. Jim talked with Ben Schauer and Ben Jordan of Shirley Wind. He also talked to another neighbor. Jim states Ben Jordan was very open in attempts of Duke Energy to be a good neighbor. He states whether you believe in the infrasound theory or you believe in the Somatoform disorder theory that the Canadian medical team put together, there are parts that overlap. He states one is noise. Noise you can hear above the audible range. Another is flicker. He states Duke Energy shuts down the turbines as best they can when flicker is hitting a house or chicken coop if people complain about it. Jim was curious why some turbines were shut off during a great wind and that is the reason. Jim also states that Ben Jordan told him that the Town of Glenmore with Duke Energy evaluated many of the neighbors for stray voltage last year. Jim continued they found two did have stray voltage. He states Duke Energy went further and had two different electrical companies look at each of the 13 sites and asked the electricians to figure out what was the cause of the stray voltage. On a farm that had stray voltage and in the record as a complainant, the stray voltage was from a faulty switch in his barn which would easily account for loss of milk production. At a second site, which was Ben Schauer's, they also found stray voltage. Jim indicated Ben stated his sons had panic attacks and his wife sleeps in the basement because she can't get good sleep on the second floor where their bedroom is located. Ben also said he is not affected by whatever it is that is affecting his wife's sleep and his son. He has three children and his middle one is not affected. His older son is affected and he thinks the youngest one may be having some panic attacks. Ben had an electrician come in and it was determined that the fuse box was improperly grounded in the basement of the house and he had it fixed. They were getting shocks in the house. Jim believes you have to go case by case in this controversy between the two theories and update the stressed population. He believes it is a good idea to do stray voltage studies on an on-going basis. Jim states Ben really supports a study of these two theories and he knows it will take time.

Jim states in the Canadian study they state it's a somatoform disorder and it is alleviated by a course of psychotherapy much like you treat a soldier with PTSD coming back from Iraq. Jim states he talked to his neighbor who lives in a new house next to the turbines. Jim states he has had these problems. He is in the record and his doctor suggested this course of treatment which would solve his problems. Jim will keep investigating individual cases if they come forward on the public record. He states the Board needs to pursue an outline for a study and then get the cost of it and they need to do it now. He thinks that is the Board's next step.

Richard Schadewald wondered how we are receiving complaints. He also states we should continue to receive new information.

MOTION: To suspend rules to hear from interested parties

Schadewald / Crawford

MOTION CARRIED

Ben Jordan from Duke Energy states they have a claim resolution procedure with the Town of Glenmore. Each month they document all the complaints that come into Shirley wind, how they can adjust them and they are on file within the Glenmore Township.

Jim Crawford stated while he was there, a flicker complaint came in from Cindy Ossman who is the Clerk of Glenmore. It wasn't on her kitchen window. It was on the corner of her house. Ben recorded it and within 7 days had to tell the Town of Glenmore of a complaint. Jim believes that a computer is adjusted so that the turbine turns off when the sun is at that exact position throughout the year. Richard Schadewald asked Ben Jordan if that was correct. Ben Jordan stated, "There is a computer model algorithm that goes into where the alignment from the sun to the turbines to the home is. We are able to go and adjust those times as needed." Ben states there is a complaint resolution procedure with the Town of Glenmore.

Jim Vanden Boogart stated the complaint resolution procedure is probably outlined in the condition use permit. Jim states shadow flicker that is not a big part of the discussion. Jim wondered if Duke Energy proactively goes out and seeks opportunities to adjust their algorithms to make sure that doesn't happen. Last year he logged an abundance of shadow flicker on homes. It seems to be only in response to complaints.

Barbara Vanden Boogart stated shadow flicker isn't usually associated with medical problems, however it does cause and create medical problems for some individuals. There was a complaint in Shirley Wind Project by one of the residents, who no longer lives in her home, of her getting migraines from shadow flicker that was coming into her kitchen window on a regular basis. She is not alone in having migraines triggered by a flickering light. There were videos done on shadow flicker and they are posted on line.

Bill Acker, Nicolet Drive - Bill stated the Town of Falmouth, Massachusetts has been fighting over the illnesses from two wind turbines installed by the town. When they had the health effects, the alderman immediately took a vote and agreed to take down the wind turbines. The town found out they had to raise taxes in order to remove those units which the town objected so they put it to a town vote. The vote was not to take them down. The families that were ill sued the Town of Falmouth, Massachusetts and the town zoning board reviewed that process and agreed that the people's illnesses were credible. They decided to take down the first of the two. The second wind turbine, which came on line about a year later, is going to go through that same process. For Wind 1, the town zoning board decided to take it down and decided that the people's illnesses were credible.

Jim Vanden Boogart said he checked the low frequency measurements there in the IFLN study and they were down 2.7 hertz and it is in the 0-1 hertz range where people are susceptible to low frequency. He states that's the peak nausogenicity range. At Shirley Wind it was down to .5 maybe a little less at times. Falmouth was .7. The acousticians that tested there, Ambrose and Rand, one of which tested here to, happen to be sensitive individuals to that and they both got sick at Falmouth. Jim states when Rand tested at Shirley with PSC he got sick and it took him a couple weeks before he felt better because he was in the project for three straight days. He stayed overnight in the homes to personally see what would happen to himself. He suffered for that but that was his testimony and it is in a peer reviewed document.

Sandy Johnson, 1893 Wayside Road, Greenleaf Wisconsin. Sandy has two PDF's from Jim that now hosting landowners are stepping forward in Texas. There are two hosting landowners who have filed lawsuits on Duke and in terms of the effects on them and their families. She has spoken to people in Blue Skies Green Field. Sandy called a man who has three wind turbines on his land. He inherited them from his father. She asked him if he was concerned about saying things publicly. He said he was not afraid because they committed fraud by saying it would sound like the hum of a refrigerator and it is not going to be a health issue. Sandy did not want to give his name. She states it isn't just Shirley Wind. It is in other areas of Wisconsin as well.

MOTION: To return to the regular order of business

Schadewald / Van Deurzen

MOTION CARRIED

9. Discussion on Duke Energy's Annual Payment of \$26,000 to Brown County

Jim Crawford thinks Duke Energy pays the County \$26,000 a year and the Town \$26,000 and believes there is money divided up for residents within a half mile. Jim thinks the Town of Glenmore could use the County's \$26,000 to solve or investigate this problem. Mr. Schadewald stated this money was not part of a contract. It is a voluntary payment. It goes into our planning and development budget with no specificity. Mr. Schadewald inquired and was told it was already put in the 2016 budget. He pointed out that we are going into the 2017 budget and is there another use for this money.

Jim Vanden Boogart indicated it was in the conditional use permit between Duke Energy and the Town of Glenmore. It is required to be paid for the life of the project. It is \$4,000 per megawatt, 1/3 to the town, 1/3 to the residents within a half mile, 1/3 to the County. The County is going to get it forever, no matter what.

Jim Crawford indicated that we have kicked around a study between these two theories by a medical organization or whomever and wondered if there were other ideas to help the situation. One thing might be one of the Board of Health members goes forth and talks to an expert group that might conduct a study to answer some of the questions between the two theories, which is more valid. Richard Schadewald indicated the starting point is "does the Board of Health want to ask Brown County to allocate the \$26,000 in the 2017 budget for our utilization?" Jim indicated he was giving some possible uses of the money that might be more helpful than putting it in the county budget. Jim has heard that a study could cost a million dollars. Some answers are key and they might be obtained if the seed money is used to possibly get a federal grant that might be very useful to a research group to assign a grad student to do this. That is option 1. Option 2 is return some or all

to the Town of Glenmore as a compliance fund so they could hire a local retired electrician to go around and look for stray voltage and maybe update symptoms. It could be used to pay co-pays that the town could be divided to the people who are getting this treatment in theory B. It could be used to hire a small claims attorney to handle small claims courts violations of the permit. Jim thinks the Town would decide what to do with the money. But we would just stipulate that it has to be used to help the wind turbine issue. Their uses of the money are more useful than going into the county's budget. Richard Schadewald indicated that what he is looking for first is, does the Board of Health feel comfortable asking Brown County to allocate the \$26,000 that Duke Energy gives us as an annual payment that for use in our efforts to resolve the Shirley Wind Farm health concerns.

MOTION: The annual payment by Duke Energy to Brown County is allocated to the Health Department and Board of Health for towards resolution of the Shirley Wind Health Concerns. Schadewald / Van Deurzen

MOTION CARRIED.

10. **Correspondences** - Jay Tibbetts has two letters. Carmen Krogh sent him a letter to submit to the Board. He has also been in communication with a guy named James Prostman who has unique skills in reading and understanding reading mechanism and cognitive behavior.

11. Interim Director's Report

Debbie indicated Dr. Tibbetts wanted a report on the hiring of the Director position. Debbie said there are 11 applicants and they were working on setting up interviews. Dr. Tibbetts also wanted Debbie to give what the requirements are for a Health Director. We are a Level 3 Health Department and it would be according to what the Level 3 requirements would be. He also wanted to know about the move. Debbie indicated that the state lab person did submit their requirements for the lab and now Facilities Management has to secure a contractor to make a bid as far as what those costs will be. They are putting an RFP to hire an architect. To her knowledge they have not received it. The County Executive is looking at all possibilities.

Richard Schadewald states the whole thing is about reducing the footprint. So they don't want to acquire any new property. It is a constantly evolving plan. Does it make sense? Do we spend \$80,000 or put them somewhere in our current property for less than \$80,000.

12. All Other Business Authorized by Law

Richard Schadewald heard a story about needles in parks down in Neenah and wondered if we had a policy and he wanted the board to know we are on top of it. Debbie stated Ann Steinberger got containers for most of the parks and is working on a policy for them.

13. Adjournment / Next Meeting Schedule

MOTION: To adjourn meeting

Crawford / Van Deurzen

MOTION CARRIED

NEXT MEETING:

July 19, 2016 5:00 PM

PROCEEDINGS OF THE BROWN COUNTY HUMAN SERVICES BOARD

Pursuant to Section 19.84 Wis. Stats, a regular meeting of the **Brown County Human Services Board** was held on Thursday, July 14 in in Board Room A of the Sophie Beaumont Building – 111 North Jefferson Street, Green Bay, WI

Present: Chairman Tom Lund
Paula Laundrie, Susan Hyland, Carole Andrews, Craig Huxford, Bill Clancy,
Jesse Brunette

Excused: JoAnn Grashberger

Also

Present: Erik Pritzl, Executive Director
Nancy Fennema, Deputy Director
Eric Johnson, Finance Manager
Luke Schubert, Hospital & Nursing Home Administrator
Nursing student

1. **Call Meeting to Order:**
The meeting was called to order by Chairman Lund at 5:15 pm.
2. **Approve/Modify Agenda:**
LAUNDRIE/ANDREWS moved to approve the agenda.
The motion was passed unanimously.
3. **Approve Minutes of June 9, 2016 Human Services Board Meeting:**

ANDREWS/HUXFORD moved to approve the minutes dated June 9, 2016.
The motion was passed unanimously.
4. **Executive Director's Report:**

Executive Director Pritzl handed out his report (attached).

Q: Citizen Board Member Laundrie asked if many of the clients that go to the CTC have co-occurring issues.
A: Executive Director Pritzl that they could have a substance use issue or co-occurring issues. The concept would be to bring them to Bay Haven first in order for them to meet with a treatment group and then move onto an assessment. We are still working to figure out the best route for residential treatment needs.

Q: Citizen Board Member Andrews asked if we treat patients from other counties at our facility where other counties are responsible for payment.
A: Executive Director Pritzl said that we serve more out of county adults than children. We do have emergency detentions that we handle when needed.

Citizen Board Member Laundrie wanted to state that the Pillars of Leadership we shared is a wonderful hands-on tool for anyone working in the department to know what leadership is going to provide.

Director Pritzl invited the board members to attend an agency fair we are hosting in September and handed out the flyers.

ANDREWS/LAUNDRIE moved to receive and place on file.
Motion was carried unanimously.

5. Administrator Report (CTC):

The NPC monthly report was submitted with the board packet agenda. CTC Administrator Schubert highlighted parts of his report. He stated we are aiming for a Sept 1 or Oct 1 start date for the pharmacy vendor.

DHS 124 regulations which cover our psychiatric hospital have been left to 'sunset' as of July 1st which means that we need to follow federal regulations only and not the combination of state/federal regulations.

Schubert stated that we have not replaced the Laboratory Manager who retired and are two months in with data collection. We have been sending 90% of our lab testing to Bellin with the exceptions being five tests we have been granted waivers for. The process thus far has been working very seamlessly with a good turnaround time. We will now analyze the financial impact of not running an in-house lab. We do have a contract with Bellin but haven't utilized them in the past for these services. If we are going to go down the path of contracting out lab services out permanently, we would go through the Request for Proposal (RFP) process. The remaining lab staff will still be needed for blood draw and specimen collection.

HUXFORD/HYLAND moved to receive and place on file.

Motion was carried unanimously.

6. Financial Report:

Financial Manager Eric Johnson handed out financial sheets for CTC and Community Programs (attached). For CTC, our YTD budget is showing a deficit in expenses, primarily due to depreciation. We are looking to break even from a cash flow standpoint. The CTC budget is doing very well compared to last year and we continue to move in the right direction.

For Community Programs, our current deficit does include the budgeted expense for the new mental health initiatives. With that planned amount taken into account, we have a slightly favorable bottom line.

For both CTC and Community Programs, we have variances in personnel costs, specifically employee benefits. Those are somewhat out of our control but we want to make that up in other areas if we can.

LAUNDRIE/ANDREWS moved to receive and place on file.
Motion was carried unanimously.

7. Statistical Reports:

Please refer to the packet which includes this information.

ANDREWS/HYLAND moved to receive items 7 a-d and place on file.
Motion was carried unanimously.

8. Approval for New Non-Continuous Vendor Provider & New Provider Contract:
Please refer to the packet which includes this information.

ANDREWS/LAUNDRIE moved to receive item 8 and place on file.
Motion was carried unanimously.

10. Other Matters:

Executive Director Pritzl stated that Molly Hillmann, Contracts Manager, changed the information presented on providers to present more relevant information. Citizen Board Member Laundrie stated it was appreciated.

Next Meeting: Thursday, August 11, 2016
5:15 p.m. – Community Treatment Center Room 365

13. Adjourn Business Meeting:
HUXFORD/HYLAND moved to adjourn; motion passed unanimously. Chairman Lund adjourned the meeting at 5:57 p.m.

Respectfully Submitted,

Kara Navin
Office Manager

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BROWN COUNTY HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-3600



Phone (920) 448-6000 Fax (920) 448-6126

Erik Pritzl Executive Director

To: Human Services Board
Human Services Committee

From: Erik Pritzl, Executive Director

Date: July 14, 2016

Re: Executive Director's Report

Activities since the last time the Human Services Board and Committee are summarized below by the primary division area of the department.

Community Programs

Behavioral Health

Mental Health Initiatives:

- The Request for Proposals (RFP) related to the Day Report Center has been closed, and proposals have been received. Scoring has been completed, and reference checks will be completed before the end of July.
- Department staff have drafted a guide and information associated with detoxification services. These are in the final review stage, and are targeted for distribution in July. One of the concepts includes utilizing our outpatient orientation group, substance abuse assessment, and Bay Haven Community Based Residential Facility for continued assessment and support for high relapse risk individuals.
- Mobile Crisis Expansion was approved previously, and the contracted provider, Family Services, has been successful in recruiting and filling all positions. We will monitor reports from Family Services for increasing mobile crisis contacts in the community.
- The department continues to evaluate the purchasing or provision of residential substance abuse treatment services.

Children, Youth and Families (CYF)

CYF Manager:

We are currently recruiting for a new Children, Youth and Families Manager. During this



interim period, Kevin Brennan (Child Protection Supervisor) has picked up interim duties related to the Child Protection area, and Nancy Fennema (Deputy Director) has picked up interim duties related to CABHU, Shelter Care and Juvenile Justice. Both individuals have taken these duties on in addition to their regular work, and I appreciate them for doing so.

Children's Mental Health:

There was an article in the Green Bay Press Gazette on July 10, 2016 related to children's mental health services, and the lack of local funding in Brown County for these services. I noted when contacted by the reporter that Brown County's numbers were surprising because we have increased services in this area, and now have an array that includes:

- Child, Adolescent Behavioral Health Unit (CABHU)
- Coordinated Services Teams
- Comprehensive Community Services
- Children's Long Term Support
- Birth to Three

There are likely other services specific to this population being provided through the Child Protection Unit and Juvenile Justice unit. Some of the service expansion has taken place after the reporting period used in the article (2014.) Expenses in this area could be reported for target groups or service codes that would not have been identified specifically as mental health. We are looking into this further.

Community Treatment Center

The utilization of the three units of the Community Treatment Center continues to be higher than 2015:

- The Nicolet Psychiatric Center unit is showing an average daily population of 11.3 for the year, with June's utilization slightly higher 12.7. We continue to see higher utilization by Brown County in 2016 (78%) vs. 2015 (67 %.)
- The Bay Haven CBRF unit had an average daily population of 4.5 in May, bringing the year to date average daily population to 3.7, which is just over the budgeted average of 3.6. This is a significant improvement over 2015, when the year to date average was 1.0 as of the end of June.

It is worth noting that the Community Treatment Center residential units have been working with some staff shortages due to position vacancies, and medical leaves. This has increased utilization of agency staff and overtime to meet the needs of residents.

General Department Updates

Pillars of Professional Leadership:

Our management team spent a considerable amount of time crafting this document (attached), that highlights our priorities as leaders. Through the discussions, we settled on the name of Pillars of Professional Leadership because we believe they support positive practice. As a group, we aspire to practice these pillars and encourage others to do the same. I thought it was important to include these with the report so that others could see what we are working on with respect to agency culture and leadership.

Pillars of Professional Leadership

Brown County Human Services leaders aspire to demonstrate:

Personal Accountability

Meet commitments by accurately assessing the necessary time and resources needed.
Acknowledge if you are unable to meet a deadline and convey to those affected with a revised plan for success.

Communication

Provide positive feedback, celebrate successes, address challenges or simply take time to listen and talk to improve comprehension and common understanding.

Integrity

Consistently conduct yourself with high ethical standards regardless of who is watching. Live up to your word, deliver on promises made and align your beliefs and actions.

Kindness

Practice the "Golden Rule" by treating others as you want to be treated. Be open, honest, and approachable, free from any pre-existing assumptions.

Fairness

Act impartially and honestly in accordance with accepted rules and standards.

Consistency

Be predictable in demeanor and approach across all program areas. Strive to create an environment where others know what to expect and are treated equitably.

Trustworthiness

Keep your promises and honor your commitments. Give others reason to rely on your words and actions, recognizing that trust can take a lifetime to build but only a moment to destroy.

Ethical Behavior

Embody personal moral principles and organizational standards expected of your professional discipline.

Empathy

Recognize and validate emotions in others and imagine what they are experiencing. Accept that each individual is unique and embrace differences.

Collaboration

Work with your peers, leaders, clients and community members in combining skills and resources towards fulfilling the department mission for the good of Brown County citizens.

By demonstrating these values, we promote a strong organizational culture; empower our workforce; and build a common shared purpose to achieve our goals.



Community Programs

Through 05/31/16
Prior Fiscal Year Activity Included
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund: 201 - CP									
REVENUE									
Property Taxes	16,249,887.00	.00	16,249,887.00	1,354,157.25	.00	6,770,786.25	9,479,100.75	42	6,275,313.35
Intergov Revenue	31,465,027.00	13,243.00	31,478,270.00	2,826,108.42	.00	13,449,762.84	18,028,507.16	43	32,690,554.99
Paid to Citizens	2,183,021.00	30,500.00	2,213,521.00	198,265.98	.00	936,518.14	1,277,002.86	42	870,479.22
Miscellaneous Revenue	49,400.00	.00	49,400.00	(96,321.24)	.00	70,734.43	(21,334.43)	143	49,359.87
Other Financing Sources	530,500.00	(30,500.00)	500,000.00	41,666.00	.00	208,333.00	291,667.00	42	12,790.00
REVENUE TOTALS	\$50,477,835.00	\$13,243.00	\$50,491,078.00	\$4,323,876.41	\$0.00	\$21,436,134.66	\$29,054,943.34	42%	\$39,898,497.43
EXPENSE									
Personnel Costs	18,204,396.00	.00	18,204,396.00	1,634,290.88	.00	7,650,433.86	10,553,962.14	42	8,019,834.46
Operating Expenses	33,215,383.00	2,500.00	33,217,883.00	2,453,143.53	49,515.26	13,747,026.59	19,421,341.15	42	31,940,573.45
Outlay	.00	.00	.00	.00	.00	(165.00)	165.00	+++	13,267.90
EXPENSE TOTALS	\$51,419,779.00	\$2,500.00	\$51,422,279.00	\$4,087,434.41	\$49,515.26	\$21,397,295.45	\$29,975,468.29	42%	\$39,973,675.81
Fund: 201 - CP Totals									
REVENUE TOTALS	50,477,835.00	13,243.00	50,491,078.00	4,323,876.41	.00	21,436,134.66	29,054,943.34	42	39,898,497.43
EXPENSE TOTALS	51,419,779.00	2,500.00	51,422,279.00	4,087,434.41	49,515.26	21,397,295.45	29,975,468.29	42	39,973,675.81
Fund: 201 - CP Totals	(\$941,944.00)	\$10,743.00	(\$931,201.00)	\$236,442.00	(\$49,515.26)	\$38,839.21	(\$920,524.95)		(\$75,178.38)
Grand Totals									
REVENUE TOTALS	50,477,835.00	13,243.00	50,491,078.00	4,323,876.41	.00	21,436,134.66	29,054,943.34	42	39,898,497.43
EXPENSE TOTALS	51,419,779.00	2,500.00	51,422,279.00	4,087,434.41	49,515.26	21,397,295.45	29,975,468.29	42	39,973,675.81
Grand Totals	(\$941,944.00)	\$10,743.00	(\$931,201.00)	\$236,442.00	(\$49,515.26)	\$38,839.21	(\$920,524.95)		(\$75,178.38)



Community Treatment Center

Through 05/31/16
Prior Fiscal Year Activity Included
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund 630 - CTC									
REVENUE									
Property taxes	2,797,019.00	.00	2,797,019.00	233,084.92	.00	1,165,424.60	1,631,594.40	42	1,074,284.60
Intergovt Revenue	4,006,480.00	.00	4,006,480.00	327,013.70	.00	1,684,182.08	2,322,297.92	42	1,253,833.82
Public Charges	3,826,594.00	.00	3,826,594.00	322,917.92	.00	1,577,599.36	2,248,994.64	41	1,387,033.61
Miscellaneous Revenue	1,569,820.00	.00	1,569,820.00	147,276.24	.00	748,529.58	821,290.42	48	570,690.05
Other financing sources	.00	6,397.00	6,397.00	.00	.00	6,397.20	(.20)	100	.00
REVENUE TOTALS	\$12,199,913.00	\$6,397.00	\$12,206,310.00	\$1,030,292.78	\$0.00	\$5,182,132.82	\$7,024,177.18	42%	\$4,285,842.08
EXPENSE									
Debt service	8,825,562.00	6,397.00	8,831,959.00	830,791.82	.00	3,897,108.86	4,934,850.14	44	3,764,063.06
Operating Expenses	4,178,122.00	.00	4,178,122.00	346,651.61	.00	1,793,234.55	2,384,887.45	43	1,767,937.61
Outlay	.00	.00	.00	.00	.00	.00	.00	+++	1,326.74
EXPENSE TOTALS	\$13,003,684.00	\$6,397.00	\$13,010,081.00	\$1,177,443.43	\$0.00	\$5,690,343.41	\$7,319,737.59	44%	\$5,533,327.41
Fund 630 - CTC Totals									
REVENUE TOTALS	12,199,913.00	6,397.00	12,206,310.00	1,030,292.78	.00	5,182,132.82	7,024,177.18	42	4,285,842.08
EXPENSE TOTALS	13,003,684.00	6,397.00	13,010,081.00	1,177,443.43	.00	5,690,343.41	7,319,737.59	44	5,533,327.41
Fund 630 - CTC Totals	(\$803,771.00)	\$0.00	(\$803,771.00)	(\$147,150.65)	\$0.00	(\$508,210.59)	(\$295,560.41)		(\$1,247,485.33)
Grand Totals									
REVENUE TOTALS	12,199,913.00	6,397.00	12,206,310.00	1,030,292.78	.00	5,182,132.82	7,024,177.18	42	4,285,842.08
EXPENSE TOTALS	13,003,684.00	6,397.00	13,010,081.00	1,177,443.43	.00	5,690,343.41	7,319,737.59	44	5,533,327.41
Grand Totals	(\$803,771.00)	\$0.00	(\$803,771.00)	(\$147,150.65)	\$0.00	(\$508,210.59)	(\$295,560.41)		(\$1,247,485.33)

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**PROCEEDINGS OF THE BROWN COUNTY
VETERANS' RECOGNITION SUBCOMMITTEE**

Pursuant to Section 19.84, Wis. Stats., a regular meeting of the **Brown County Veterans' Recognition Subcommittee** was held on Tuesday, June 21, 2016 at 4:30 p.m. in Room 201 of the Northern Building, 305 E. Walnut Street, Green Bay, Wisconsin.

PRESENT: Chair Erickson, Duane Pierce, Ed Koslowski, Jim Haskins, Joe Witkowski, Jerry Polus

EXCUSED: Delores Pierce, Tracy Rosinski, Carl Soderberg

****Running Total of Veterans' Certificates: 1730**

1. **Call Meeting to Order.**

The meeting was called to order by Chair Bernie Erickson at 4:30 pm.

2. **Invocation.**

3. **Approve/Modify Agenda.**

Motion made by Jim Haskins, seconded by Duane Pierce to modify the agenda to take Item 6 following Item 3. Vote taken. MOTION CARRIED UNANIMOUSLY

4. **Approve/Modify Minutes of May 17, 2016.**

It was noted in Item 9 of the May 17, 2016 minutes that the motion was made by Duane Pierce, seconded by Jim Haskins (not Pierce).

Motion made by Jim Haskins, seconded by Joe Witkowski to approve as corrected. Vote taken. MOTION CARRIED UNANIMOUSLY

5. **Communication from Supervisor Schadewald re: This letter is my request for consideration of either temporary and/or permanent artwork to be displayed outside of the Veterans' Memorial Arena. My hope is that local artists can submit appropriate artwork for consideration to display.**

Polus said he read this with interest and noted that the veterans' memorial is managed by a group through the Village of Ashwaubenon. Erickson did not think this should have been referred to this subcommittee. This communication will also go to the Education and Recreation Committee which is the oversight committee for the Arena and Erickson will also call Supervisor Schadewald directly to discuss this further with him.

Motion made by Duane Pierce, seconded by Ed Koslowski to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

6. **Update re: Honor Rewards Program.**

Cathy Williquette was in attendance and noted that the recent press conference regarding the Honor Rewards program at the Pancake Place went very well. She stated the TV stations did a good job of covering the event, but she was disappointed that there was no press coverage. She noted that several veterans signed up for the program and that when ID cards are requested, they can be requested either with or without a photo. To date, 68 veterans have signed up although 3 were denied because they were not Brown County residents. So far 47 cards have been mailed out and the rest will be going out shortly after information is verified.

Williquette continued that the other exciting part of the Honor Rewards program is that there are 73 businesses signed up to date. She had the vendor change the website a little bit to make the business names a little more prominent than they were before to make it easier to read. Williquette noted she has dropped off advertising

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the business associations who worked to get the word out about the program be contacted again in the fall with an update on the program and to put the word out again for any additional businesses that may wish to sign up. Polus will make a note to contact the business associations in a few months.

Williquette also said one of her employees suggested setting up a table at the Pearly Gates ride on July 9. Duane Pierce gave her contact information so she could ask permission. Pierce noted that last year the Pearly Gates ride have over 500 bikes and a number of hot rods participate so this may be a good way to make contact with some veterans if Pearly Gates will allow it. Erickson also suggested that Williquette contact the area armories to see if they can put information on the program on their websites. Williquette said that she has been hearing from other Register of Deeds who may be interested in starting the program in their counties after hearing of the success that Brown County is having.

Koslowski suggested that the Honor Rewards program also be promoted at the Fair and Polus said that he will have his laptop there to help anyone interested in signing up.

7. Possible Discussion re: 2016 Veterans' Appreciation Day at the Brown County Fair.

a) 25th Anniversary of Desert Storm.

Erickson recalled that at the last meeting the group agreed on the dog tags to be handed out to the Desert Storm veterans. A discussion was held with regard to what the dog tags should say and "Honoring Desert Storm and Desert Shield 25th Anniversary" was agreed upon. Erickson will order 250 dog tags and they should be in here plenty of time for the event.

b) Fair Agenda.

Haskins asked if a speaker has been lined up. He would like to see the speaker be a veteran of Desert Storm/Desert Shield. This was discussed and several suggestions were made. Koslowski said that Amber from the veterans' home in King is a very good and powerful speaker and Polus agreed. He noted he has already extended an invitation to her to have a table in the tent. Polus knows her well and will ask her if she would be interested in speaking.

The rest of the agenda was reviewed and discussed. The distribution of the certificates and dog tags will be done similar to how the certificates and carnations were distributed last year. A question was asked as to who will be handling the table where people can sign up for their veterans certificates and Erickson said that he will work on finding someone to help with that.

Erickson felt it would be a nice gesture to give Laura Nehlson some sort of gift for coming to sing the National Anthem. Haskins said that she is very humble and does not expect anything, but Erickson felt a small gift would be appropriate.

c) Approval of Fair poster.

Polus provided an updated poster with the changes that were discussed previously. The subcommittee agreed that the poster was good and Polus will have them printed at the document center. The posters will be ready for distribution a month prior to the Fair. Every veterans' organization will receive a poster in the mail and the rest will be distributed for posting in various areas including the area reserve centers. Tickets will also be prepared and ready for distribution a month prior to the Fair. Erickson reminded Polus to be sure that the ticket says that it permits admission for the veteran and a guest.

Polus said he will get the letter out to the groups that will be invited to have a table in the tent before the end of the month. Koslowski said the Meet and Greet group has had one meeting and he would like an updated list of organizations and contact information from Polus.

8. Report from CVSO Jerry Polus.

Polus reported that June 25 is Veterans Appreciation Night at the Green Bay Blizzard game. Polus's office will have a table at the game along with several other organizations to provide information for veterans. The game starts at 7:05 pm. 10

9. **Comments from Carl Soderberg.**

Soderberg was excused; no report.

10. **Report from Committee Members Present (Erickson, Dahlke, Desisles, Haskins, Koslowski, Pierce, Rosinski & Witkowski).**

–Erickson commented on the event taking place at the 9th Street Wellness Center that was discussed at the last meeting. John Hoes asked if anyone from the Subcommittee would be helping out and Erickson advised him that anyone interested would contact him directly. Hoes also wanted to know if the County had any tents available for the event and Erickson advised him to contact the National Guard or the reserve centers.

-Haskins informed that he recently watched the Coca Cola 600 and each car in the race had the name of a fallen veteran on their windshield. Haskins also reported on a soldier from Chicago who went missing on March 28, 1968 in Vietnam. The soldier's remains have been identified by DNA and he will be buried on June 22 at Arlington National Cemetery. Haskins said there are still 1,618 POW/MIAs unaccounted for.

-Koslowski said he would still like Bill Trembl to come to a meeting to speak and Erickson said that was fine. He also talked about the Veterans Day activities and how things will be handled this year without Rosemary Desisles. He said that discussions were held in the past about scaling back the activities since the Honor Rewards program provides year round deals. Witkowski felt that companies could still be solicited for door prizes. Erickson said that the first thing that would need to be done is to get a chairperson. He will check with some of the Board members to see if there is any interest.

-Pierce informed that the Pearly Gates Ride will be held on July 9. The military ceremony will be held at 11:00 am prior to the ride. This year POW/MIAs will be honored and there will also be a number of WW II vets as special guests. There will also be an eight story high hot air balloon with the POW logo on it. The ride will leave at noon and return around 4:30 pm.

-Witkowski said he read in the newspaper that from 5:00 – 8:00 pm on the first Wednesday of every month Brown County residents can visit the Museum free with verification of residency.

Witkowski continued that he attended the Honor Rewards press conference on May 25 and said it seemed so nonchalant that he never wants to attend another press conference. He said that Williquette said the event was really fantastic but he did not think it was fantastic at all. He called the newspaper a few days later to ask where the article in the paper was and he was told that there was no article. Erickson said that the paper was notified but chose not to do anything. Witkowski did not feel it was appropriate for County Executive Troy Streckenbach to make the announcement about the new program when he does not know anything about it. He continued that Streckenbach never even mentioned the Brown County Veterans Recognition Subcommittee. Polus noted that this Committee did not spearhead the Honor Rewards program at all. He said that this was coordinated by himself and Cathy Williquette in conjunction with the County Executive, but nobody on the Subcommittee was asked to go out and solicit participation. Witkowski feels that the advantages of the Honor Rewards program are more for the businesses than the veterans.

11. **Such Other Matters as Authorized by Law.**

Erickson said he went to the National Guard to ask if they would have any military vehicles available for display at the Fair. He will ask for a duce and a Humvee but noted that the armory still has to receive permission to do this.

12. **Adjourn.**

Motion made by Jim Haskins, seconded by Duane Pierce to adjourn at 5:33 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Therese Giannunzio
Recording Secretary

10



Helping People, Strengthening Families, Building Community

Outcome Reporting Narrative-Teen Parent Program
Second Quarter 2016

Outcome	Results Narrative
Client reports obtaining help from at least one referred agency.	100% of clients reported connecting with at least one other agency that the teen parent program referred them to. One client was not measured as she had just started services.
Client will have a stable place to live.	91% of clients have a stable place to live. Four clients were staying with different family members/friends each night.
Clients are knowledgeable about their options (parenting/adoption).	Of the 18 clients who were pregnant during this quarter, all of them were knowledgeable about their options.
If parenting plan was chosen, client was successful in:	All of the 18 clients who were pregnant during this quarter chose to parent their child. They all participated in prenatal care. 16 accessed community resources to increase their parenting skills, and 12 discussed asset building activities with their case manager.
Client delivered a baby that weighed at least 5.5 pounds	Eleven clients delivered babies this quarter; all babies were at least 5.5 pounds.
Client able to identify at least 2 additional informal community resources	100% of clients were able to identify at least 2 additional formal or informal resources. One client was not measured as she had just started services.
Client reports utilizing informal resources	100% of clients report utilizing informal supports. One client was not measured as she had just started services.
Client is able to identify at least one goal toward self-sufficiency within three	All clients were able to self-identify goals toward self-sufficiency during this quarter.

months of enrolling in the program	One client was not measured as she had just started services.
Client has at least monthly contact with worker	71% of clients met at least monthly with their worker.
Client shows progress toward meeting established goals.	87% of clients show progress toward meeting goals.
When abuse is believed to have occurred, mother is referred and supported in law enforcement, and any other agency	One report of abuse this quarter and the teens were assisted in their contacts.
Father (or other family member, if applicable) meets with worker at least one time while case is open	69% of clients had either the father of their child and/or other family member involved in services.
Father or other family member is offered services.	Fathers/family members were offered services 65% of the time. (based on program eligibility).
Client, in need of mental health and/or AODA services, meets regularly with a mental health and/or AODA provider.	Four clients were identified as being in need of mental health and/or AODA services this quarter. Three meet regularly with a mental health and/or AODA provider.
Client, in need of mental health and/or AODA services, is not discharged from the program prior to mental health and/or AODA services being received.	One client who was discharged from the program this quarter was identified as being in need of mental health and/or AODA services. That client was receiving services at time of discharge.
Did client already graduate from high school or earn a GED/HSED?	28% of clients enrolled in the program this quarter already graduated from high school or earned a GED/HSED.
Client is enrolled and attending school on a regular basis, meeting school district standards for attendance and truancy	34 clients were attending school (high school or college) this quarter. 67% of them were attending school regularly. Case managers are working diligently with clients' schools and other service providers to reduce barriers to school attendance.
Client graduates with a high school diploma or high school equivalency degree	14 teen parents earned a diploma or GED within this and the previous quarter. Six have employment or are enrolled in post-secondary education.
Client experienced a subsequent pregnancy while enrolled in the program.	Two pregnancies reported this quarter.
Client participates in natural family planning and/or healthy relationship	98% clients participated in healthy relationship and/or natural family planning

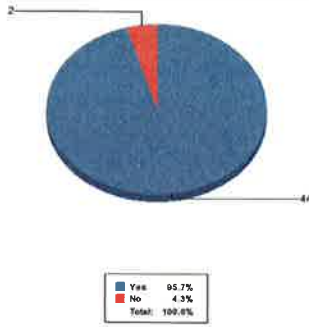
education.	education.
Program participants do not experience a pregnancy for 2 years after program discharge.	No pregnancies were reported during follow up contacts.
Parent identified "at risk" of involvement with CPS	15% of teen parents are considered at risk of CPS involvement. Primary reasons; homelessness.
Parent involved with CPS	No clients have an open case with CPS.
CPS referral made this quarter	Referral was made regarding nine teen parents this quarter. Primary reasons for reports were parenting concerns and teens under age of consent for sex.
Is client a father?	6 teen parent program clients are teen fathers.
Has father participated in any appointments with mother of child since mother's file was opened?	21 fathers have participated in appointments.
Has paternity been established?	In 44 cases it was known if paternity has been established or not. Of those 44, paternity was established in 22 cases. *This is a new measurement for the program that started in the fourth quarter of 2015. Changes to assessment forms have been made to accurately capture this number. As a reminder, the vast majority of teen parents are receiving badgercare for their child and therefore are mandated to cooperate with child support unless there is good cause not to.
If no, has worker assisted teen parent in connecting with child support in order to establish paternity?	Workers assisted seven clients in connecting with child support. In other situations, clients have decided not to pursue child support on their own yet or the child has not been born yet.

Follow up contacts (month 6, 12, 18, 24 after program discharge) summary-
Staff attempted to contact 23 former clients via phone and/or mail this quarter. No former clients completed a survey (many phone numbers were no longer active or addresses incorrect due to client moving).

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client reports obtaining help from at least one referred agency

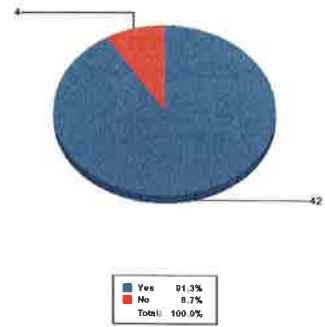
"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client will have stable place to live

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Clients knowledgeable about their options (parenting and adoption)

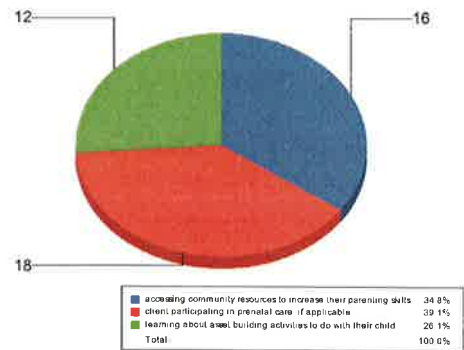
"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 18
Percent of Responses represented in graph: 39.13%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

If parenting plan was chosen, client successful in:

Defined Text/Non-Exclusive Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 18
Percent of Responses represented in graph: 39.13%



2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client delivered a baby that weighed at least 5.5 pounds

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 11
Percent of Responses represented in graph: 23.91%



■ Yes 100.0%
Total: 100.0%

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client about to identify at least 2 additional informal resources

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 45
Percent of Responses represented in graph: 97.83%

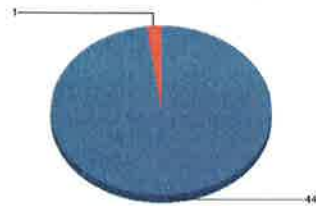


■ Yes 100.0%
Total: 100.0%

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client reports utilizing informal resources

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 45
Percent of Responses represented in graph: 97.83%



■ Yes 97.8%
■ No 2.2%
Total: 100.0%

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client is able to identify at least one goal toward self-sufficiency within three months of enrolling in program.

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 45
Percent of Responses represented in graph: 97.83%



■ Yes 100.0%
Total: 100.0%

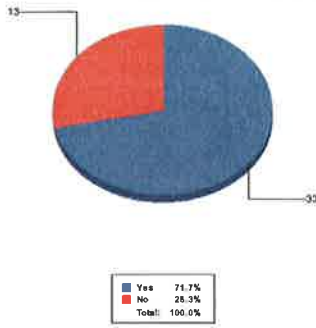
2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client has at least monthly contact with worker

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%

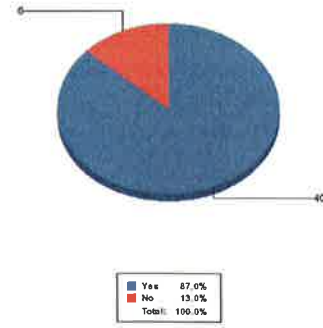


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client shows progress toward meeting established goals and overall asset score (if applicable).

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%

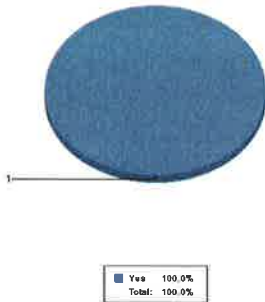


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

When abuse is believed to have occurred, mother is referred and supported in contacts with law enforcement, and any other agency involved.

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 1
Percent of Responses represented in graph: 2.17%

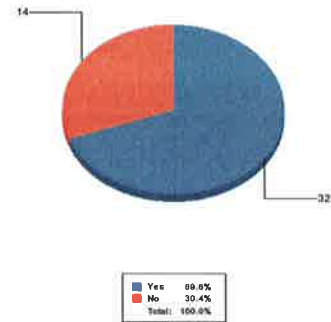


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Father (or other family member, if applicable) meets with worker at least one time while case is open.

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



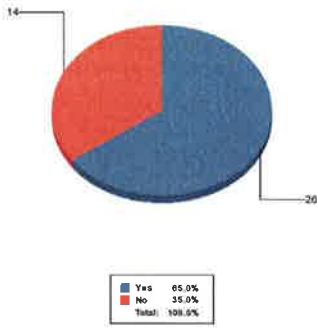
2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Father or other family member, if applicable, is offered services.

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 40
Percent of Responses represented in graph: 86.96%

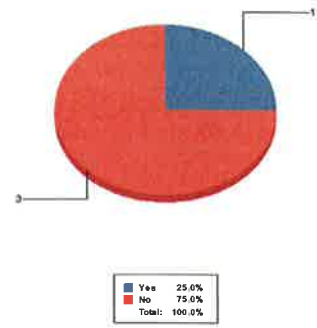


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client, in need of mental health and/or AODA services, meets regularly with a mental health and/or AODA provider.

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 4
Percent of Responses represented in graph: 8.70%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client, in need of mental health and/or AODA services, is not discharged from the program prior to mental health and/or AODA services being received.

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 1
Percent of Responses represented in graph: 2.17%

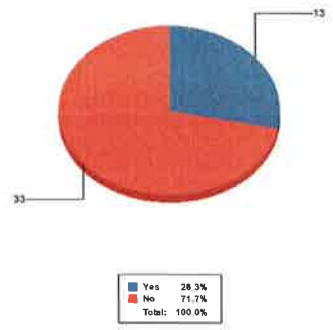


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Did client already graduate from high school or earn GED/HSED?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

If so, what year?

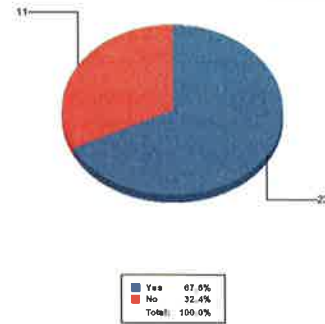
Arbitrary Text/Text Area Review: Number of Responses in Date Range: 46
Number of responses represented in question: 14
Percent of responses represented in question: 30.43%

Most frequent answer: June 2015

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client is enrolled and attending school on a regular basis, meeting school district standards for attendance and truancy

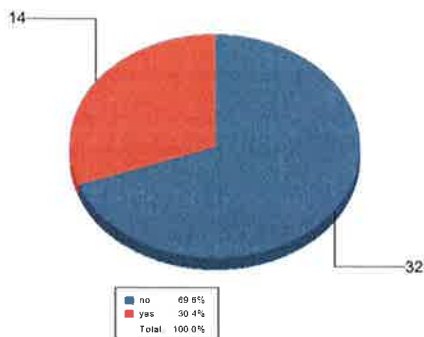
"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 34
Percent of Responses represented in graph: 73.91%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client graduates with a high school diploma or high school equivalency degree

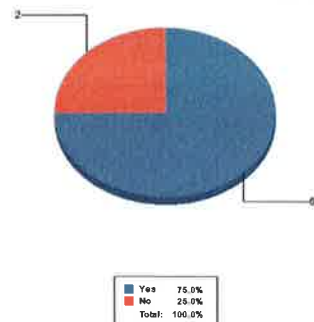
Defined Text/Non-Exclusive Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client has employment or is enrolled in post secondary education within three months of graduation

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 8
Percent of Responses represented in graph: 17.39%

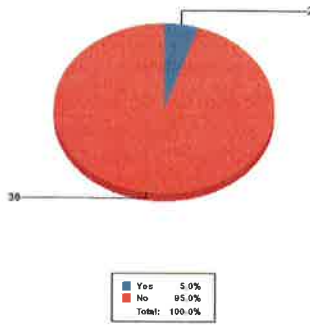


2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client experienced a subsequent pregnancy while enrolled in the program.

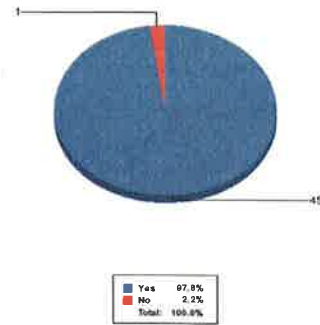
"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 40
Percent of Responses represented in graph: 86.96%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Client participates in natural family planning and/or healthy relationship education.

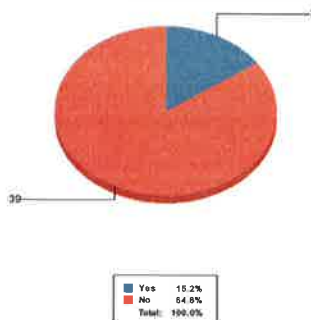
"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Parent identified "at risk" of involvement with CPS?

"Yes/No" Review: Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%



Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Is so Why?

Arbitrary Text/Text Area Review: Number of Responses in Date Range: 46
Number of responses represented in question: 9
Percent of responses represented in question: 19.57%

Most frequent answer: Homelessness

2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Parent involved with CPS?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 44
Percent of Responses represented in graph: 95.65%



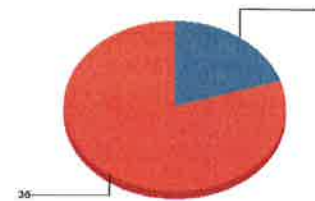
No 100.0%
Total: 100.0%

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

CPS referral made this quarter?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 45
Percent of Responses represented in graph: 97.83%



Yes 20.0%
No 80.0%
Total: 100.0%

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

If CPS referral made is yes, how many reports were made?

Number Review:

(mouse over Maximum & Minimum for Participant)

Number of Responses in Date Range: 46
Number of responses represented in question: 12
Percent of responses represented in question: 26.09%

Maximum: 2.00
Minimum: 0.00
Average: 1.00
Median: 1.00
Sum: 12.00

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

If CPS referral made is yes, what is the nature of the reports?

Arbitrary Text/Text Area Review:

Number of Responses in Date Range: 46
Number of responses represented in question: 11
Percent of responses represented in question: 23.91%

Most frequent answer: Baby was with the father and he was making drug deals from the home according to client.

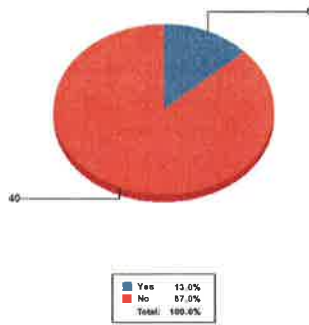
2

Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Is client a father?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%

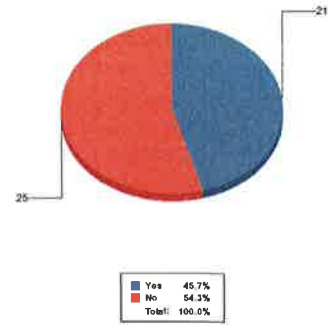


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Has father participated in any appointments with mother of child since mother's file was opened?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 46
Percent of Responses represented in graph: 100.00%

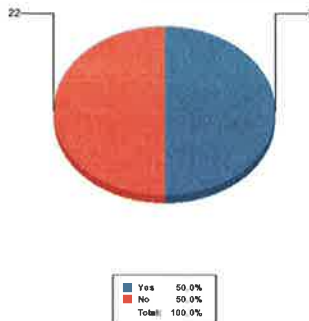


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

Has paternity been established?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 44
Percent of Responses represented in graph: 95.65%

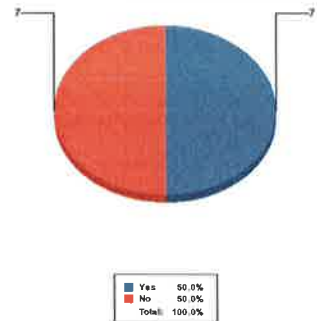


Summary of Responses for Teen Parent Outcome Measurement Sheet.
Between 04/01/2016 and 06/29/2016

If no, has worker assisted teen parent in connecting with child support in order to establish paternity?

"Yes/No" Review:

Number of Responses in Date Range: 46
Number of Responses represented in graph: 14
Percent of Responses represented in graph: 30.43%



2

Summary of Responses for Teen Parent Outcome Measurement Sheet.

Between 04/01/2016 and 06/29/2016

Additional Comments

Arbitrary Text/Text Area Review:	Number of Responses in Date Range:	46
	Number of responses represented in question:	20
	Percent of responses represented in question:	43.48%

Most frequent answer: Baby is not born.

2

DEPARTMENT VACANCIES REPORT

AS OF JUNE 27, 2016

(Positions with A1 Approval to Fill)

Dept.	Position Title	# of Vacancies
Child Support	Child Support Specialist - Paternity	1.00
Child Support	Clerk/Typist II	1.00
Corporation Counsel	Corp Counsel	1.00
CTC	APNP	1.00
CTC	CNA	0.20
CTC	CNA	0.40
CTC	CNA	1.00
CTC	COTA	0.40
CTC	CTP Worker	1.00
CTC	Food Service Worker	0.25
CTC	Food Service Worker	0.35
CTC	RN Charge Nurse	1.00
CTC	Switchboard Op./Receptionist	0.29
CTC	Switchboard Op./Receptionist	0.20
District Attorney	Special Drug Task Force Attorney	1.00
Human Resources	Benefits Manager	1.00
Human Resources	Human Resources Associate	1.00
Human Services	Account Clerk/Budget Counselor	1.00
Human Services	AODA Counselor	1.00
Human Services	AODA Counselor	1.00
Human Services	Children, Youth & Families Manager	1.00
Human Services	Clerk III (Cash Receipts)	1.00
Human Services	Clerk IV/Data Control	1.00
Human Services	Economic Support Specialist	1.00
Human Services	SW/CM (Adult Protective Services)	1.00
Human Services	SW/CM (CCOP)	1.00
Human Services	SW/CM (Child Protection)	1.00
Human Services	SW/CM (CLTS)	1.00
Human Services	SWCM	1.00
Library	Library Service Assistant	0.53
Library	Library Service Associate	0.53
Library	Shelver	0.24
NEW Zoo	Administrative Secretary	1.00
PALS	Planner I/Transportation/GIS	1.00
Public Safety Comm.	Emergency Management Director	1.00
Public Works - Facilities	Housekeeper	1.00
Public Works - Facilities	Housekeeper	1.00
Public Works - Facilities	Housekeeper	0.50
Public Works - Highway	Highway Crew	1.00
Public Works - Highway	Sign Crew	1.00
Public Works - Highway	Sign Crew	1.00
Register of Deeds	Vital Records Specialist	0.70
Sheriff's	Correctional Officer	1.00
Sheriff's	Correctional Officer	1.00
Sheriff's	Correctional Officer	1.00
Sheriff's	Correctional Officer	1.00
Sheriff's	Correctional Officer	1.00
Sheriff's	Correctional Officer	1.00
Sheriff's	Patrol Officer	1.00
Sheriff's	Patrol Officer	1.00
Sheriff's	Patrol Officer	1.00
Sheriff's	Patrol Officer	1.00
Sheriff's	Patrol Officer	1.00
Technology Services	Enterprise System Analyst I	1.00
Technology Services	Enterprise System Analyst II	1.00

OFFICIAL PROCLAMATION

VETERANS OF OPERATION

DESERT SHIELD/DESERT STORM

1990 – 1991

WHEREAS, 25 years ago more than 600,000 American military members hastily deployed to the Middle East in order to liberate the nation of Kuwait from Iraqi occupation; and

WHEREAS, nearly 300 Americans and 100 Allied servicemen and women made the ultimate sacrifice and did not return home to their families; and

WHEREAS, these courageous soldiers have earned the respect, esteem and profound gratitude of the American public for their service and bravery sacrificing everything in the defense of others in order to protect life and liberty; and

WHEREAS, Brown County salutes and honors all of our veterans from Operation Desert Shield/Desert Storm for their valiant service, you shall never be forgotten.

NOW THEREFORE, The Brown County Board of Supervisors does hereby proclaim August 20th as
OPERATION DESERT SHIELD/DESERT STORM VETERANS DAY in Brown County, Wisconsin.

Troy J. Streckenbach
County Executive

Patrick W. Moynihan, Jr.
Chair, Brown County Board of Supervisors

Bernie J. Erickson
Chair, Veterans' Recognition Subcommittee

Jerry E. Polus
Brown County Veterans Service Officer

16-39

BUDGET ADJUSTMENT REQUEST**Category****Approval Level**

- | | |
|---|---|
| <input type="checkbox"/> 1 Reallocation from one account to another in the same level of appropriation | Dept Head |
| <input type="checkbox"/> 2 Reallocation due to a technical correction that could include: <ul style="list-style-type: none"> • Reallocation to another account strictly for tracking or accounting purposes • Allocation of budgeted prior year grant not completed in the prior year | Director of Admin |
| <input type="checkbox"/> 3 Any change in any item within the Outlay account which does not require the reallocation of funds from another level of appropriation | County Exec |
| <input type="checkbox"/> 4 Any change in appropriation from an official action taken by the County Board (i.e. resolution, ordinance change, etc.) | County Exec |
| <input type="checkbox"/> 5 a) Reallocation of <u>up to 10%</u> of the originally appropriated funds between any levels of appropriation (based on lesser of originally appropriated amounts) | Admin Committee |
| <input type="checkbox"/> 5 b) Reallocation of <u>more than 10%</u> of the funds original appropriated between any of the levels of appropriation. | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 6 Reallocation between two or more departments, regardless of amount | Oversight Comm
2/3 County Board |
| <input checked="" type="checkbox"/> 7 Any increase in expenses with an offsetting increase in revenue | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 8 Any allocation from a department's fund balance | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 9 Any allocation from the County's General Fund | Oversight Comm
Admin Committee
2/3 County Board |

Justification for Budget Change:

Wisconsin Early Childhood Partners Region grant is to purchase and provide Ages and Stages Questionnaires (ASQ) to parents to fill out and return in a postage paid envelope. The questionnaires make sure the children are developing well and this screening provides a quick look at how children are doing in areas, such as communication, physical ability, social skills and problem solving.

Amount: \$500

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.305.4904	Grants	\$500
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.305.5300.001	Supplies Office	\$417
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.305.5300.004	Postage	\$83
<input type="checkbox"/>	<input type="checkbox"/>			

Katherine E. Bruster
Signature of Department Head

AUTHORIZATIONS

[Signature]
Signature of DOA or Executive

Department: Health

Date: 5-16-16

Date: 5/17/16

16-40

BUDGET ADJUSTMENT REQUEST

CategoryApproval Level

- ☐ 1 Reallocation from one account to another in the same level of appropriation
Dept Head
- ☐ 2 Reallocation due to a technical correction that could include:
• Reallocation to another account strictly for tracking or accounting purposes
• Allocation of budgeted prior year grant not completed in the prior year
Director of Admin
- ☐ 3 Any change in any item within the Outlay account which does not require the reallocation of funds from another level of appropriation
County Exec
- ☐ 4 Any change in appropriation from an official action taken by the County Board (i.e. resolution, ordinance change, etc.)
County Exec
- ☐ 5 a) Reallocation of up to 10% of the originally appropriated funds between any levels of appropriation (based on lesser of originally appropriated amounts)
Admin Committee
- ☐ 5 b) Reallocation of more than 10% of the funds original appropriated between any of the levels of appropriation.
Oversight Comm
2/3 County Board
- ☐ 6 Reallocation between two or more departments, regardless of amount
Oversight Comm
2/3 County Board
- ☒ 7 Any increase in expenses with an offsetting increase in revenue
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2/3 County Board
- ☐ 8 Any allocation from a department's fund balance
Oversight Comm
2/3 County Board
- ☐ 9 Any allocation from the County's General Fund
Oversight Comm
Admin Committee
2/3 County Board

Justification for Budget Change:

The Healthcare Emergency Response Coalition (NEW-HERC) has been awarded \$11,957 to help their EMS partners be better prepared and able to respond in a disaster or emergency relating to Ebola activities or any of the Healthcare Emergency Preparedness Capabilities. The funds will be used to reimburse services provided by contractors/vendors.
Amount: \$11,957

The State of Wisconsin has awarded an Adult Immunization Grant to increase adult seasonal influenza vaccinations by sharing information with other agencies and entering the data into the Wisconsin Immunization Registry (WIR). This project will expand on duties already being performed by our nurses, health educators and health aides. The health aides will not be needed in the school during summer and will work on this project during that time.
Amount: \$15,603

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.300.4302	CARS State Grant and aid revenue	\$27,560
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.300.5700	Contracted Services	\$11,957
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.001.9002.400	Transfer In Wages	\$15,603
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.300.9003.400	Transfer Out Wages	\$15,603
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.001.5100	Regular Earnings	\$15,603

Deborah E. [Signature]
Signature of Department Head

AUTHORIZATIONS

[Signature]
Signature of DCA or Executive

Department: HealthDate: 5-18-16Date: 5/17/16

16-41

BUDGET ADJUSTMENT REQUEST

CategoryApproval Level

- | | |
|---|---|
| <input type="checkbox"/> 1 Reallocation from one account to another in the same level of appropriation | Dept Head |
| <input type="checkbox"/> 2 Reallocation due to a technical correction that could include: <ul style="list-style-type: none"> • Reallocation to another account strictly for tracking or accounting purposes • Allocation of budgeted prior year grant not completed in the prior year | Director of Admin |
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2/3 County Board |
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Admin Committee
2/3 County Board |

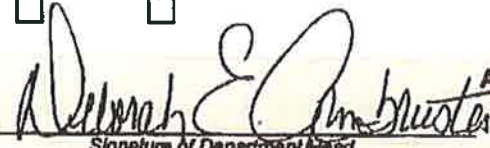

Justification for Budget Change:

Community Health Improvement in Action (CHIA) project is funded by the UW School of Medicine and Public Health from the Wisconsin Partnership Program educating community members in alcohol awareness. Funds up to \$2,200 will be disbursed upon completion of training via webinars and/or local, regional and statewide meetings

Amount: \$2,200

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.305.4904	Grants	\$2,200
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.305.5100	Regular Earnings	\$2,200
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

 20
5/17/16

 Signature of Department Head	AUTHORIZATIONS	 Signature of DOA or Executive
Department: <u>Health</u> Date: <u>5-16-16</u>		Date: <u>5/17/16</u>

BUDGET ADJUSTMENT REQUEST

Category

Approval Level

- | | |
|--|---|
| <input type="checkbox"/> 1 Reallocation from one account to another in the same level of appropriation | Dept Head |
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2/3 County Board |
| <input type="checkbox"/> 9 Any allocation from the County's General Fund | Oversight Comm
Admin Committee
2/3 County Board |

Justification for Budget Change:

BIOTERRORISM PREPAREDNESS PROGRAM GRANT - The preparedness program was awarded conference and training scholarships to individuals attending specific conference and trainings which covered registration, transportation to/from the conference/training and hotel in the total amount of \$27,285 Budget Adj Request Amount: \$27,285

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.300.4302	CARS State Grant and Aid Revenue	\$27,285
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.060.300.5340	CARS Training	\$27,285
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

23 6/28/16



Signature of Department Head

AUTHORIZATIONS



Signature of DGA or Executive
Date: 6/28/16

Department: Health
Date: 6-28-2016

16-65

BUDGET ADJUSTMENT REQUEST

CategoryApproval Level

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> 1 | Reallocation from one account to another in the same level of appropriation | Dept Head |
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2/3 County Board |
| <input type="checkbox"/> 9 | Any allocation from the County's General Fund | Oversight Comm
Admin Committee
2/3 County Board |

Justification for Budget Change:

**** 2016**** The 2015 balanced budget adjustment was approved by the County Board of Supervisors under Resolution 10-c on May 18, 2016. As part of this resolution, \$162,882.94 was transferred from the General Fund to Community Programs (CP) to offset the negative unrestricted equity within that fund. Subsequent to that, audit adjustments for 2015 discovered by our outside audit firm (Schenck SC) gave Community Programs additional net income of \$321,065 for 2015.

As such, the transfer that occurred in 2015 is recommended for reversal in 2016, as Community Programs has sufficient equity in 2015 without this transfer.

Budget Impact : \$162,882.94

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.090.9002	Transfer In (General Fund)	\$162,882.94
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.001.9003	Transfer Out (CP)	\$162,882.94
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

Preparer: David P Ehlinger 7-11-2016

7/13/16



Signature of Department Head

Department: Human ServicesDate: 7/13/16

AUTHORIZATIONS



Signature of DOA or Executive
Date: 7/13/16

11a

BROWN COUNTY HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-3600



Phone (920) 448-6000 Fax (920) 448-6126

Erik Pritzl *Executive Director*

To: Human Services Board
Human Services Committee

From: Erik Pritzl, Executive Director

Date: July 14, 2016

Re: Executive Director's Report

Activities since the last time the Human Services Board and Committee are summarized below by the primary division area of the department.

Community Programs

Behavioral Health

Mental Health Initiatives:

- The Request for Proposals (RFP) related to the Day Report Center has been closed, and proposals have been received. Scoring has been completed, and reference checks will be completed before the end of July.
- Department staff have drafted a guide and information associated with detoxification services. These are in the final review stage, and are targeted for distribution in July. One of the concepts includes utilizing our outpatient orientation group, substance abuse assessment, and Bay Haven Community Based Residential Facility for continued assessment and support for high relapse risk individuals.
- Mobile Crisis Expansion was approved previously, and the contracted provider, Family Services, has been successful in recruiting and filling all positions. We will monitor reports from Family Services for increasing mobile crisis contacts in the community.
- The department continues to evaluate the purchasing or provision of residential substance abuse treatment services.

Children, Youth and Families (CYF)

CYF Manager:

We are currently recruiting for a new Children, Youth and Families Manager. During this



interim period, Kevin Brennan (Child Protection Supervisor) has picked up interim duties related to the Child Protection area, and Nancy Fennema (Deputy Director) has picked up interim duties related to CABHU, Shelter Care and Juvenile Justice. Both individuals have taken these duties on in addition to their regular work, and I appreciate them for doing so.

Children's Mental Health:

There was an article in the Green Bay Press Gazette on July 10, 2016 related to children's mental health services, and the lack of local funding in Brown County for these services. I noted when contacted by the reporter that Brown County's numbers were surprising because we have increased services in this area, and now have an array that includes:

- Child, Adolescent Behavioral Health Unit (CABHU)
- Coordinated Services Teams
- Comprehensive Community Services
- Children's Long Term Support
- Birth to Three

There are likely other services specific to this population being provided through the Child Protection Unit and Juvenile Justice unit. Some of the service expansion has taken place after the reporting period used in the article (2014.) Expenses in this area could be reported for target groups or service codes that would not have been identified specifically as mental health. We are looking into this further.

Community Treatment Center

The utilization of the three units of the Community Treatment Center continues to be higher than 2015:

- The Nicolet Psychiatric Center unit is showing an average daily population of 11.3 for the year, with June's utilization slightly higher 12.7. We continue to see higher utilization by Brown County in 2016 (78%) vs. 2015 (67 %.)
- The Bay Haven CBRF unit had an average daily population of 4.5 in May, bringing the year to date average daily population to 3.7, which is just over the budgeted average of 3.6. This is a significant improvement over 2015, when the year to date average was 1.0 as of the end of June.

It is worth noting that the Community Treatment Center residential units have been working with some staff shortages due to position vacancies, and medical leaves. This has increased utilization of agency staff and overtime to meet the needs of residents.

General Department Updates

Pillars of Professional Leadership:

Our management team spent a considerable amount of time crafting this document (attached), that highlights our priorities as leaders. Through the discussions, we settled on the name of Pillars of Professional Leadership because we believe they support positive practice. As a group, we aspire to practice these pillars and encourage others to do the same. I thought it was important to include these with the report so that others could see what we are working on with respect to agency culture and leadership.

Pillars of Professional Leadership

Brown County Human Services leaders aspire to demonstrate:

Personal Accountability

Meet commitments by accurately assessing the necessary time and resources needed.

Acknowledge if you are unable to meet a deadline and convey to those affected with a revised plan for success.

Communication

Provide positive feedback, celebrate successes, address challenges or simply take time to listen and talk to improve comprehension and common understanding.

Integrity

Consistently conduct yourself with high ethical standards regardless of who is watching. Live up to your word, deliver on promises made and align your beliefs and actions.

Kindness

Practice the “Golden Rule” by treating others as you want to be treated. Be open, honest, and approachable, free from any pre-existing assumptions.

Fairness

Act impartially and honestly in accordance with accepted rules and standards.

Consistency

Be predictable in demeanor and approach across all program areas. Strive to create an environment where others know what to expect and are treated equitably.

Trustworthiness

Keep your promises and honor your commitments. Give others reason to rely on your words and actions, recognizing that trust can take a lifetime to build but only a moment to destroy.

Ethical Behavior

Embody personal moral principles and organizational standards expected of your professional discipline.

Empathy

Recognize and validate emotions in others and imagine what they are experiencing. Accept that each individual is unique and embrace differences.

Collaboration

Work with your peers, leaders, clients and community members in combining skills and resources towards fulfilling the department mission for the good of Brown County citizens.

By demonstrating these values, we promote a strong organizational culture; empower our workforce; and build a common shared purpose to achieve our goals.

BROWN COUNTY HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-3600



Phone (920) 448-6000 Fax (920) 448-6166

Erik Pritzl, Executive Director

To: Human Services Committee

Date: July 18, 2016

Subject: YTD Results through May

Community Treatment Center

Financial results for the Community Treatment Center are much improved from 2015 results on a YTD basis. However, overall results remain unfavorable compared to budget. The average anticipated deficit per month is \$66,981 based on an annual budgeted deficit of \$803,771 which represents non-cash depreciation expense for the year. Without depreciation expense the facility is budgeted to break even on a cash flow basis including the allocated amount of levy funding. Actual results are an average monthly deficit of \$101,642 reflecting an unfavorable variance of \$34,661 compared to the average monthly budget noted above.

Revenues are essentially at budget with 42% used as of 5/31. Expenses are at 44% compared to a benchmark of 42% based on 5 months elapsed, including both personnel costs and other operating expenses slightly over budget. Managers have been asked to monitor overtime and use of nursing agency to limit the use of these more costly staffing options as much as possible while meeting patient care needs. All other operating expenses over budget are under review with the goal to reduce expenditures throughout the rest of the year.

Community Programs

As of 5/31/16 Community Programs shows a modest favorable net operating result of \$38,839. This is in line with overall budget expectations after taking into consideration the budget of \$1,050,000 for special 2016 mental health initiatives. These initiatives are in various stages of development with related expenses beginning to be recognized.

Both personnel costs and other operating expenses are at the 42% benchmark of annual budgeted expense for operations through May.

Respectfully Submitted,

Eric Johnson
Finance Manager



Community Treatment Center

Through 05/31/16
Prior Fiscal Year Activity Included
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund 630 - CTC									
REVENUE									
Property taxes	2,797,019.00	.00	2,797,019.00	233,084.92	.00	1,165,424.60	1,631,594.40	42	1,074,284.60
Intergov Revenue	4,006,480.00	.00	4,006,480.00	327,013.70	.00	1,684,182.08	2,322,297.92	42	1,253,833.82
Public Charges	3,826,594.00	.00	3,826,594.00	322,917.92	.00	1,577,599.36	2,248,994.64	41	1,387,033.61
Miscellaneous Revenue	1,569,820.00	.00	1,569,820.00	147,276.24	.00	748,529.58	821,290.42	48	570,690.05
Other Financing Sources	.00	6,397.00	6,397.00	.00	.00	6,397.20	(.20)	100	.00
REVENUE TOTALS	\$12,199,913.00	\$6,397.00	\$12,206,310.00	\$1,030,292.78	\$0.00	\$5,182,132.82	\$7,024,177.18	42%	\$4,285,842.08
EXPENSE									
Personnel Costs	8,825,562.00	6,397.00	8,831,959.00	830,791.82	.00	3,897,108.86	4,934,850.14	44	3,764,063.06
Operating Expenses	4,178,122.00	.00	4,178,122.00	346,651.61	.00	1,793,234.55	2,384,887.45	43	1,767,937.61
Outlay	.00	.00	.00	.00	.00	.00	.00	+++	1,326.74
EXPENSE TOTALS	\$13,003,684.00	\$6,397.00	\$13,010,081.00	\$1,177,443.43	\$0.00	\$5,690,343.41	\$7,319,737.59	44%	\$5,533,327.41
Fund 630 - CTC Totals									
REVENUE TOTALS	12,199,913.00	6,397.00	12,206,310.00	1,030,292.78	.00	5,182,132.82	7,024,177.18	42	4,285,842.08
EXPENSE TOTALS	13,003,684.00	6,397.00	13,010,081.00	1,177,443.43	.00	5,690,343.41	7,319,737.59	44	5,533,327.41
Fund 630 - CTC Totals	(\$803,771.00)	\$0.00	(\$803,771.00)	(\$147,150.65)	\$0.00	(\$508,210.59)	(\$295,560.41)		(\$1,247,485.33)
Grand Totals									
REVENUE TOTALS	12,199,913.00	6,397.00	12,206,310.00	1,030,292.78	.00	5,182,132.82	7,024,177.18	42	4,285,842.08
EXPENSE TOTALS	13,003,684.00	6,397.00	13,010,081.00	1,177,443.43	.00	5,690,343.41	7,319,737.59	44	5,533,327.41
Grand Totals	(\$803,771.00)	\$0.00	(\$803,771.00)	(\$147,150.65)	\$0.00	(\$508,210.59)	(\$295,560.41)		(\$1,247,485.33)

13



Community Programs

Through 05/31/16
Prior Fiscal Year Activity Included
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund 201 - CP									
REVENUE									
Property taxes	16,249,887.00	.00	16,249,887.00	1,354,157.25	.00	6,770,786.25	9,479,100.75	42	6,275,313.35
Intergov Revenue	31,465,027.00	13,243.00	31,478,270.00	2,826,108.42	.00	13,449,762.84	18,028,507.16	43	32,690,554.99
Public Charges	2,183,021.00	30,500.00	2,213,521.00	198,265.98	.00	936,518.14	1,277,002.86	42	870,479.22
Miscellaneous Revenue	49,400.00	.00	49,400.00	(96,321.24)	.00	70,734.43	(21,334.43)	143	49,359.87
Other Financing Sources	530,500.00	(30,500.00)	500,000.00	41,666.00	.00	208,333.00	291,667.00	42	12,790.00
REVENUE TOTALS	\$50,477,835.00	\$13,243.00	\$50,491,078.00	\$4,323,876.41	\$0.00	\$21,436,134.66	\$29,054,943.34	42%	\$39,898,497.43
EXPENSE									
Personnel Costs	18,204,396.00	.00	18,204,396.00	1,634,290.88	.00	7,650,433.86	10,553,962.14	42	8,019,834.46
Operating Expenses	33,215,383.00	2,500.00	33,217,883.00	2,453,143.53	49,515.26	13,747,026.59	19,421,341.15	42	31,940,573.45
Outlay	.00	.00	.00	.00	.00	(165.00)	165.00	+++	13,267.90
EXPENSE TOTALS	\$51,419,779.00	\$2,500.00	\$51,422,279.00	\$4,087,434.41	\$49,515.26	\$21,397,295.45	\$29,975,468.29	42%	\$39,973,675.81
Fund 201 - CP Totals									
REVENUE TOTALS	50,477,835.00	13,243.00	50,491,078.00	4,323,876.41	.00	21,436,134.66	29,054,943.34	42	39,898,497.43
EXPENSE TOTALS	51,419,779.00	2,500.00	51,422,279.00	4,087,434.41	49,515.26	21,397,295.45	29,975,468.29	42	39,973,675.81
Fund 201 - CP Totals	(\$941,944.00)	\$10,743.00	(\$931,201.00)	\$236,442.00	(\$49,515.26)	\$38,839.21	(\$920,524.95)		(\$75,178.38)
Grand Totals									
REVENUE TOTALS	50,477,835.00	13,243.00	50,491,078.00	4,323,876.41	.00	21,436,134.66	29,054,943.34	42	39,898,497.43
EXPENSE TOTALS	51,419,779.00	2,500.00	51,422,279.00	4,087,434.41	49,515.26	21,397,295.45	29,975,468.29	42	39,973,675.81
Grand Totals	(\$941,944.00)	\$10,743.00	(\$931,201.00)	\$236,442.00	(\$49,515.26)	\$38,839.21	(\$920,524.95)		(\$75,178.38)

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CTC DOUBLE SHIFTS WORKED 6/14/16 THRU 7/15/16

Date	Employee Name	Classification	shifts worked
6/14/2016	JOHN BEGALKE	CNA	PM NOC
6/15/2016	LALA LUCKETT	CNA	AM PM
6/16/2016	JOHN BEGALKE	CNA	PM NOC
6/16/2016	MANDY WOODWARD	RN	PM NOC
6/17/2016	BRIAN FURST	CNA	AM PM
6/17/2016	ANGELO PITCHFORD	CNA	AM PM
6/18/2016	JENNY DEPREY	CNA	AM PM
6/18/2016	LYMAN JACOBS	CNA	AM PM
6/18/2016	JOHN BEGALKE	CNA	PM NOC
6/18/2016	BOB JOACHIM	CNA	AM PM
6/19/2016	LYMAN JACOBS	CNA	AM PM
6/19/2016	MARY YANG	CNA	AM PM
6/19/2016	MARY LOR	CNA	AM PM
6/19/2016	LINDA HARRILL	CNA	AM PM
6/19/2016	CHRIS SACOTTE	RN	PM NOC
6/20/2016	STEPHANIE CROOKS	CNA	AM PM
6/22/2016	JOHN BEGALKE	CNA	PM NOC
6/23/2016	JOHN BEGALKE	CNA	PM NOC
6/23/2016	MARY YANG	CNA	PM NOC
6/24/2016	ANGELO PITCHFORD	CNA	AM PM
6/24/2016	MANDY WOODWARD	RN	PM NOC
6/24/2016	CHUE CHANG	CNA	PM NOC
6/25/2016	MARY LOR	CNA	AM PM
6/25/2016	JOHN BEGALKE	CNA	PM NOC
6/26/2016	JOHN BEGALKE	CNA	PM NOC
6/27/2016	JOHN BEGALKE	CNA	PM NOC
6/28/2016	LUDA SVETLICHNYY	RN	PM NOC
6/28/2016	JOHN BEGALKE	CNA	PM NOC
6/29/2016	JOHN BEGALKE	CNA	PM NOC
6/30/2016	ANGELO PITCHFORD	CNA	AM PM
6/30/2016	LUDA SVETLICHNYY	RN	PM NOC
6/30/2016	BRENDA SPENCER	LPN	PM NOC
7/1/2016	LALA LUCKETT	CNA	AM PM
7/1/2016	BRIAN FURST	CNA	AM PM
7/1/2016	NICOLE HAWK	LPN	PM NOC
7/1/2016	JOHN BEGALKE	CNA	PM NOC
7/2/2016	BRIAN FURST	CNA	AM PM
7/2/2016	JOHN BEGALKE	CNA	PM NOC
7/2/2016	LYMAN JACOBS	CNA	PM NOC
7/2/2016	BRENDA SPENCER	LPN	PM NOC
7/3/2016	RACHAEL DEVLIN	RN	AM PM
7/3/2016	JOHN BEGALKE	CNA	PM NOC
7/3/2016	CHRIS SACOTTE	RN	PM NOC
7/4/2016	RACHAEL DEVLIN	RN	AM PM
7/4/2016	MANDY WOODWARD	RN	PM NOC
7/4/2016	JOHN BEGALKE	CNA	PM NOC
7/5/2016	CHRIS SACOTTE	RN	PM NOC
7/5/2016	CRIS KOSKI	LPN	PM NOC
7/6/2016	ZACH ALLEN	CNA	PM NOC
7/7/2016	JOHN BEGALKE	CNA	PM NOC
7/8/2016	BOB JOACHIM	CNA	AM PM
7/8/2016	KEVIN KAZALUCKAS	CNA	AM PM
7/9/2016	DESI BAUMGARTNER	CNA	NOC AM
7/9/2016	MANDY WOODWARD	RN	NOC AM
7/9/2016	JOHN BEGALKE	CNA	PM NOC
7/10/2016	LALA LUCKETT	CNA	AM PM
7/11/2016	SARA SAND (ELITE)	LPN	PM NOC

**BROWN COUNTY COMMUNITY TREATMENT CENTER
JUNE 2016 BAY HAVEN STATISTICS**

ADMISSIONS	June	YTD 2016	YTD 2015
Voluntary - Mental Illness	24	125	62
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	0
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	0
Emergency Detention - Mental Illness	0	0	0
Court Order Prelim. - Mental Illness	0	0	0
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	0	0	0
Commitment - Mental Illness	0	0	0
Return from Conditional Release	0	0	0
Court Order Prelim. - Drug	0	0	0
Other	0	0	0
TOTAL	24	125	62

AVERAGE DAILY CENSUS	June	YTD 2016	YTD 2015
Bay Haven	4.5	3.7	1.0
TOTAL	4.5	3.7	1.0

INPATIENT SERVICE DAYS			
Bay Haven	134	666	185
TOTAL	134	666	185

BED OCCUPANCY			
Bay Haven	30%	24%	7%
TOTAL	30%	24%	7%

DISCHARGES			
Bay Haven	22	122	63
TOTAL	22	122	63

DISCHARGE DAYS			
Bay Haven	137	633	188
TOTAL	137	633	188

ADMISSIONS BY UNITS			
Bay Haven	24	125	62
TOTAL	24	125	62

AVERAGE LENGTH OF STAY			
Bay Haven	6	5	3
TOTAL	6	5	3

ADMISSIONS BY COUNTY			
Brown	19	107	46
Door	1	4	1
Kewaunee	1	2	4
Oconto	1	2	2
Marinette	0	0	0
Shawano	1	4	6
Waupaca	0	0	0
Menominee	0	1	1
Outagamie	0	1	1
Manitowoc	0	1	1
Winnebago	0	0	0
Other	1	3	0
TOTAL	24	125	62

AVERAGE LENGTH OF STAY BY COUNTY			
Brown	6	5	2
Door	7	4	0
Kewaunee	1	1	2
Oconto	2	1	2
Marinette	0	0	0
Shawano	7	4	3
Waupaca	0	0	0
Menominee	0	2	1
Outagamie	0	0	0
Manitowoc	0	1	0
Winnebago	0	0	0
Other	3	2	0
TOTAL	6.0	5	2

NEW ADMISSIONS			
Bay Haven	21	96	47
TOTAL	21	96	47

In/Outs	Current	2016	2015
	3	14	1

READMIT WITHIN 30 DAYS			
Bay Haven	1	8	3
TOTAL	1	8	3

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**BROWN COUNTY COMMUNITY TREATMENT CENTER
JUNE 2016 NICOLET PSYCHIATRIC CENTER STATISTICS**

ADMISSIONS	June	YTD 2016	YTD 2015
Voluntary - Mental Illness	7	75	83
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	1
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	1
Emergency Detention - Mental Illness	44	305	341
Court Order Prelim. - Mental Illness	0	0	0
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	3	13	6
Commitment - Mental Illness	0	0	0
Return from Conditional Release	6	43	41
Court Order Prelim. - Drug	0	0	0
Other (3 Party Petition Drug/Mental)	1	1	1
TOTAL	61	437	474

AVERAGE DAILY CENSUS	June	YTD 2016	YTD 2015
Nicolet	12.7	11.3	9.5
TOTAL	12.7	11.3	9.5

INPATIENT SERVICE DAYS	June	YTD 2016	YTD 2015
Nicolet	381	2058	1737
TOTAL	381	2058	1737

BED OCCUPANCY	June	YTD 2016	YTD 2015
Nicolet (16 Beds)	79%	71%	60%
TOTAL (16 Beds)	79%	71%	60%

DISCHARGES	June	YTD 2016	YTD 2015
Nicolet	64	437	478
TOTAL	64	437	478

DISCHARGE DAYS	June	YTD 2016	YTD 2015
Nicolet	368	2018	1726
TOTAL	368	2018	1726

ADMISSIONS BY UNITS	June	YTD 2016	YTD 2015
Nicolet	61	437	474
TOTAL	61	437	474

AVERAGE LENGTH OF STAY	June	YTD 2016	YTD 2015
Nicolet	6	5	4
TOTAL	6	5	4

ADMISSIONS BY COUNTY	June	YTD 2016	YTD 2015
Brown	46	339	316
Door	0	8	10
Kewaunee	2	12	13
Oconto	1	14	22
Marinette	0	6	19
Shawano	0	6	24
Waupaca	0	2	1
Menominee	0	4	3
Outagamie	4	12	4
Manitowoc	5	19	34
Winnebago	1	2	2
Other	2	13	26
TOTAL	61	437	474

AVERAGE LENGTH OF STAY BY COUNTY	June	YTD 2016	YTD 2015
Brown	6	5	4
Door	0	2	1
Kewaunee	2	4	2
Oconto	12	7	3
Marinette	0	5	5
Shawano	0	4	11
Waupaca	0	0	0
Menominee	0	10	1
Outagamie	4	4	1
Manitowoc	8	6	4
Winnebago	1	1	0
Other	12	8	3
TOTAL	6	6	3

NEW ADMISSIONS	June	YTD 2016	YTD 2015
Nicolet	33	222	221
TOTAL	33	222	221

In/Outs	Current	2016	2015
	1	16	28

READMIT WITHIN 30 DAYS	June	YTD 2016	YTD 2015
Nicolet	3	45	68
TOTAL	3	45	68

**BELLIN PSYCHIATRIC CENTER
INVOLUNTARY AND VOLUNTARY CHILD/ADOLESCENT ADMISSIONS**

	Jun-14	Jun-15	Jun-16
VOLUNTARY ADMISSIONS	17	20	18
INVOLUNTARY ADMISSIONS	10	8	4
VOLUNTARY INPATIENT DAYS	63	62	19.6
INVOLUNTARY INPATIENT DAYS	34	85	90.2
VOL. AV. LENGTH OF STAY	3.7	3.3	3.9
INVOL AV. LENGTH OF STAY	3.4	7	5

Report of Child Abuse/Neglect by Month

Month	2014	2015	2016	% Change from 2015 to 2016
January	404	415	435	4.82 %
February	433	432	463	6.19 %
March	431	460	466	1.3%
April	487	455	452	-.66%
May	470	422	465	10.19 %
June	345	330		
July	311	312		
August	298	282		
September	439	420		
October	461	440		
November	320	426		
December	397	415		
Total	4796	4809		

Reports Investigated by Month

Month	2014	2015	2016	% Increase from 2015 to 2016
January	153	146	163	11.64%
February	140	141	139	-1.42 %
March	160	161	122	-24.22%
April	168	144	136	-5.56%
May	164	147	133	-9.52%
June	143	143		
July	139	113		
August	116	113		
September	164	150		
October	165	141		
November	128	100		
December	137	121		
Total	1777	1620		

HUMAN SERVICES
2016 PROVIDER CONTRACT LIST - 7/15/2016

Agency	Service(s) Description	Target Client	Program Unit(s)	Main Program Mgr	Contract Sent	Contract Returned	Original Not-to-Exceed Amount	Updated Not-to-Exceed Amount
Acceptational Minds LLC	Living skills for behaviorally-challenged children/families	Children	CLTS	Lori	1/7/2016	1/15/16	\$75,000	\$75,000
Adams LAFH	3-4 bed traditional adult family home	MH/AODA	Behavioral Health	Ian	11/30/15	1/5/16	\$111,218	\$111,218
Advocates for Healthy Transitional Living LLC	Foster and respite care	High behavioral needs children	CABHU, CPS, CLTS	Lana	1/19/16	1/26/16	\$275,000	\$275,000
Advocates Extension LLC	Counseling, daily living skills, summer programming, respite care, CCS services	High behavioral needs children	CABHU, CPS, JJ, CLTS	Lana	1/19/16	1/26/16	\$700,000	\$707,500
Agnesian Healthcare Inc.	Autism services	Children	CLTS	Lori	11/30/15	1/11/16	\$22,100	\$22,100
American Foundation of Counseling	Foster care services	Children	CPS	Lana	12/7/15	1/11/16	\$100,000	\$100,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children	CLTS	Lori	11/17/15	1/11/16	\$24,000	\$24,000
Angelson Arcadian	CBRF (assisted living)	DD, PD	C-COP	Lori		1/28/16	\$150,000	\$150,000
Anna's Healthcare (formerly County Living)	CBRF (assisted living)	MH/AODA	Behavioral Health, C-COP	Ian	11/30/15	1/19/16	\$180,000	\$180,000
ASPIRO Inc.	Birth to 3 services, respite, prevocational training, adult day programming	DD youth/children	C-COP, CLTS	Lori	12/17/15	1/4/16	\$414,500	\$429,500
Bellin Health Occupational Health Solutions	Drug screenings	Adult parents	CPS	Lana	11/30/15	1/19/16	\$25,000	\$25,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	Behavioral Health	Ian	1/25/16	2/8/16	\$10,000	\$235,000
Better Days Mentoring	Youth mentoring services, daily living skills	Youth	JJ	Lana	12/21/15	1/5/16	\$25,000	\$25,000
Boll Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	Behavioral Health, C-COP	Ian	12/17/15	12/29/15	\$825,000	\$825,000
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	C-COP	Ian	11/30/15	1/14/16	\$558,000	\$558,000
Caravel Autism Services	Autism services	Children			12/1/15	12/16/15	\$375,000	\$375,000
Care for All Ages (CFAA)	CBRF (assisted living), child day care	Children	CPS	Lana	11/30/15	1/11/16	\$50,000	\$50,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services	Teens	CPS	Lana	11/30/15	12/21/15	\$169,406	\$169,406
Centerpiece LLC	Autism services	Children	CLTS	Lori	11/30/15	12/11/15	\$190,000	\$190,000
Cerebral Palsy Inc.	Birth to 3 services, respite, adult day programming	DD youth/children	CLTS, C-COP	Lori	12/17/15	12/29/15	\$314,500	\$314,500
Childrens Service Society	Foster care services	Children	CLTS	Lori	12/7/15	12/29/15	\$25,000	\$25,000
Chileida Institute	Children high-needs residential care center	Children	CPS, CABHU	Lana	1/14/16	1/25/16	\$175,000	\$175,000
Clarity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	C-COP	Lori	12/16/15	1/28/16	\$53,000	\$53,000
Compass Development	CBRF (assisted living)	PD with MH issues	C-COP	Lori	4/18/16	4/28/16	\$45,000	\$45,000
Curative Connections (formerly NEW Curative)	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA	JJ, CPS, CLTS, C-COP	Ian	12/17/15	1/7/16	\$257,000	\$257,000
Curo Care LLC	Corporate adult family homes (assisted living)	PD with MH issues	C-COP	Lori	11/30/15	12/29/15	\$200,000	\$200,000
Darnell Receiving Home	Receiving home for emergency placements	Children	CPS	Lana	12/7/15	12/21/15	\$19,710	\$19,710
Deer Path Assisted Living Inc.	CBRF, corporate adult family homes (assisted living)	MH/AODA	Behavioral Health, C-COP	Ian	11/30/15	1/12/16	\$300,000	\$315,500

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HUMAN SERVICES
2016 PROVIDER CONTRACT LIST - 7/15/2016

Agency	Service(s) Description	Target Client	Program Unit(s)	Main Program Mgr	Contract Sent	Contract Returned	Original Not-to-Exceed Amount	Updated Not-to-Exceed Amount
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	Behavioral Health	Ian	11/30/15	1/4/16	\$285,000	\$285,000
Dynamic Family Solutions	Family counseling/treatment programs	Families of juvenile delinquent	JJ	Lana	12/29/15	1/19/16	\$155,000	\$155,000
East Shore Industries	Day programming for PD/DD disabled	PD with MH issues	C-COP	Lori	11/30/15	1/11/16	\$10,000	\$10,000
Elsner AFH	1-2 bed traditional adult family home	MH	Behavioral Health	Ian	1/18/16	1/25/16	\$15,826	\$15,826
Encompass Child Care	Child day care	Children	CPS	Lana	11/30/15	12/21/15	\$70,000	\$70,000
Engberg AFH	1-2 bed traditional adult family home	PD with MH issues	C-COP	Lori	11/30/15	12/7/15	\$15,852	\$15,852
Expressive Therapies LLC	Music therapy for children	Children	CLTS	Lori	5/16/16	5/26/16	\$15,000	\$15,000
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	Behavioral Health, CABHU, APS, CPS, C-COP	Ian	12/17/15	12/29/15	\$2,440,015	\$2,614,015
Family Training Program	Parenting/family skills training	CSP parents, parents of juvenile delinquent	JJ, CSP	Lana	12/29/15	1/11/16	\$155,000	\$155,000
Golden House	Domestic abuse services	Adults in need	APS	Ian	12/1/15	12/11/15	\$63,086	\$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	C-COP	Lori	11/30/15	1/14/16	\$50,300	\$50,300
Goodwill Industries	Prevocational services	PD with MH issues	C-COP	Lori	12/1/15	12/21/15	\$6,000	\$6,000
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc.	CPS case children and adults	CPS	Lana	---	---	\$15,000	\$15,000
Helping Hands Caregivers	Supportive home care	PD with MH issues	C-COP	Lori	12/1/15	1/11/16	\$10,000	\$10,000
Home Instead Senior Care	Supportive home care	PD with MH issues	C-COP	Lori	12/1/15	1/4/16	\$10,000	\$10,000
Homes for Independent Living	CBRF (assisted living)	MH	Behavioral Health	Ian	12/1/15	1/4/16	\$260,000	\$260,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	Behavioral Health	Ian	12/1/15	12/14/15	\$331,000	\$338,500
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	C-COP	Lori	12/1/15	12/8/15	\$130,000	\$130,000
Innovative Counseling	Autism services	Children	CLTS	Lori	12/1/15	1/19/16	\$10,000	\$10,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	Behavioral Health, CABHU, JJ, CPS, C-COP	Ian	1/4/16	1/14/16	\$1,814,200	\$1,814,200

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HUMAN SERVICES
2016 PROVIDER CONTRACT LIST - 7/15/2016

Agency	Service(s) Description	Target Client	Program Unit(s)	Main Program Mgr	Contract Sent	Contract Returned	Original Not-to-Exceed Amount	Updated Not-to-Exceed Amount
KCC Fiscal Agent Services	Payor of client-hired personal care workers	Children with long-term care needs	CLTS	Lori	12/8/15	12/29/15	\$800,000	\$800,000
Klein, Steven Dr.	Autism services	Children	CLTS	Lori	12/1/15	12/10/15	\$535,000	\$535,000
Krueger Receiving Home	Receiving home for emergency placements	Children	CPS	Lana	12/7/15	12/29/15	\$13,140	\$13,140
Lac Du Flambeau Lake Superior Chippewa Indians	Gookomis Endaad AODA residential treatment	Native American AODA	Behavioral Health	Ian	3/14/16	4/18/16	\$50,000	\$50,000
Lad Lake	Youth high-needs residential care center	Youth boys ages 9-21	JJ, CPS	Lana	12/1/15	1/4/16	\$40,000	\$40,000
Lamers Bus Lines Inc.	Specialized transportation	DD youth transitioning to adults	CLTS	Lori	12/1/15	12/21/15	\$25,000	\$25,000
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	Behavioral Health	Ian	1/18/16	1/28/16	\$765,000	\$765,000
Macht Village Programs Inc. (MVP)	Respite care, counseling, daily living skills, CCS services	High behavioral needs children	CABHU, CPS, JJ, CLTS	Lana	12/1/15	1/11/16	\$800,000	\$800,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	Behavioral Health, C-COP	Lori	12/1/15	1/7/16	\$100,000	\$100,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	Behavioral Health	Ian	12/1/15	1/7/16	\$162,500	\$162,500
Mystic Meadows LLC	Corporate AFH (assisted living)	MH/AODA	Behavioral Health, C-COP	Ian	12/1/15	12/10/15	\$200,000	\$200,000
NEW Community Shelter Inc.	Homeless sheltering services	MH	Behavioral Health	Ian	12/1/15	12/29/15	\$40,000	\$40,000
Northwest Passage	Children high-needs residential care center	Children	CPS, CABHU		12/1/15	12/15/15	\$125,000	\$125,000
Options for Independent Living Inc.	CCS services, home modification assessments	MH/AODA	Behavioral Health, CLTS	Ian	12/1/15	12/11/15	\$15,000	\$15,000
Options Lab Inc.	Drug screenings	AODA, CPS parents	Behavioral Health, CABHU, JJ, CP	Lana	12/1/15	12/21/15	\$40,000	\$40,000
Options Treatment Program	AODA treatment, CCS services	AODA	Behavioral Health, CABHU, JJ	Ian	12/17/15	1/25/16	\$175,000	\$199,680
Paragon Industries	Daily respite care	Children with long-term care needs	CLTS	Lori	12/1/15	1/14/16	\$125,000	\$125,000
Parent Team - CLOSED AS OF 2/13/16	Parenting/family skills training	CSP parents, parents of juvenile delinquent/MH	CABHU, CPS, JJ	Lana	12/1/15	12/11/15	\$200,000	\$200,000
Parmentier AFH	3-4 bed traditional adult family home	MH	Behavioral Health, C-COP	Ian	11/30/15	12/10/15	\$44,217	\$44,217
Phoenix Behavioral Health Services	Autism services	Children	CLTS	Lori	12/1/15	12/8/15	\$40,000	\$40,000

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HUMAN SERVICES
2016 PROVIDER CONTRACT LIST - 7/15/2016

Agency	Service(s) Description	Target Client	Program Unit(s)	Main Program Mgr	Contract Sent	Contract Returned	Original Not-to-Exceed Amount	Updated Not-to-Exceed Amount
Phuma Health Care	CBRF (assisted living)	PD with MH issues	Behavioral Health, C-COP	Ian	12/1/15	12/10/15	\$200,000	\$200,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health, C-COP	Ian	1/12/16	1/29/16	\$325,000	\$325,000
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	Behavioral Health	Ian	12/1/15	1/11/16	\$100,000	\$100,000
Rehab Resources	Birth to 3 services	DD children	CLTS	Lori	12/17/15	1/4/16	\$200,000	\$200,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	Behavioral Health, C-COP	Ian	12/8/15	12/21/15	\$267,500	\$286,535
Res-Care Wisconsin	Home health care	PD with MH issues	C-COP	Lori	12/17/15	1/4/16	\$10,000	\$10,000
Slaght AFH	3-4 bed traditional adult family home	MH	Behavioral Health	Ian	11/30/15	1/12/16	\$48,452	\$48,452
Smet AFH	1-2 bed traditional adult family home	MH	Behavioral Health	Ian	11/30/15	12/29/15	\$59,371	\$59,371
Southern Home Care Services	Home health care	PD with MH issues	C-COP	Lori	12/17/15	1/4/16	\$10,000	\$10,000
Spectrum Behavioral Health	CCS services	Children	CLTS	Lori	1/26/16	2/23/16	\$50,000	\$50,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	DD children, PD with MH issues	C-COP, CLTS	Lori	12/17/15	1/28/16	\$100,000	\$100,000
Talbot AFH	1-2 bed traditional adult family home	MH	Behavioral Health	Ian	11/30/15	12/29/15	\$6,000	\$6,000
Tomorrow's Children Inc.	Children high-needs residential care center	High behavioral needs children	CABHU	Lana	12/21/15	12/30/15	\$100,000	\$100,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	Behavioral Health	Ian	12/3/15	12/14/15	\$1,166,000	\$1,166,000
United Translators	Interpreter/translation services	Non-english speaking	All	N/A	6/27/16		\$20,000	
VanLanen Receiving Home	Receiving home for emergency placements	Children	CPS	Lana	12/7/15	1/7/16	\$19,710	\$19,710
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health	Ian	12/3/15	12/29/15	\$1,589,472	\$1,589,472
Wisconsin Early Autism Project	Autism services	Children	CLTS	Lori	12/3/15	12/15/15	\$370,000	\$370,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile delinquent	CABHU, JJ	Lana	12/3/15	12/21/15	\$26,000	\$26,000

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Brown County Human Services
New Non-Continuous and Contracted Providers
 June 14, 2016

REQUEST FOR NON-CONTINUOUS PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Individual	Providing respite to grandchildren	\$10,000	6/21/16
Individual	Providing respite to a non relative	\$10,000	6/21/16
D'Agostino's Grand Openings	Door modifications for CLTS child	\$10,000	6/21/16
Individual	Providing respite to a non relative	\$10,000	6/27/16

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE
United Translators	Translation/interpretations services	All	\$20,000	6/27/16

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